THE CAPACITY OF THE WASH SECTOR TO RESPOND TO DIFFICULT HUMANITARIAN SITUATIONS: AN ANALYSIS
Acknowledgements: The research team would like to thank all those who responded to our questions, shared their views and sent information, both at HQ level and in the field.

Special thanks to our Management Committee (Dominique Porteaud, Franck Bouvet and Andy Bastable) who tirelessly supported us and challenged us and to our Steering Committee (UNICEF, MSF, ICRC, SDC, DRC) who supported us throughout the process and encouraged us to improve the quality of the present report.

Water point in Chad

This research was carried out for the Global WASH Cluster with funding from OXFAM and UNICEF. The views expressed in this report are those of the authors alone and do not necessarily reflect those of the funding agencies.

Credit for photos: Groupe URD
Final copy editing: Etienne Sutherland
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<td>ACF:</td>
<td>Action contre la Faim</td>
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<td>ACTED:</td>
<td>Agence de Coopération Technique pour le Développement</td>
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<td>AFD:</td>
<td>Agence Française de Développement (French Development Agency)</td>
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<td>ADB:</td>
<td>African Development Bank</td>
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<td>CALP:</td>
<td>Cash Learning Partnership</td>
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<td>CAR:</td>
<td>Central African Republic</td>
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<td>CATS:</td>
<td>Community Approaches to Total Sanitation</td>
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<td>CCCM:</td>
<td>Camp Coordination and Camp Management</td>
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<td>CP:</td>
<td>Civil Protection</td>
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<td>DFID:</td>
<td>Department of International Development</td>
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<td>DPHE:</td>
<td>Department of Public Health and Environment</td>
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<tr>
<td>DRC:</td>
<td>Democratic Republic of Congo</td>
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<td>ECHO:</td>
<td>European Commission General Directorate for Civil Protection and Humanitarian Aid</td>
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<tr>
<td>EP&amp;R:</td>
<td>Emergency Preparedness and Response</td>
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<td>ETF:</td>
<td>Emergency Trust Fund</td>
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<td>DRC:</td>
<td>Danish Refugee Council</td>
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<td>FSM:</td>
<td>Faecal Sludge Management</td>
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<td>GWC:</td>
<td>Global WASH Cluster</td>
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<td>HAR:</td>
<td>Humanitarian Action Review</td>
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<td>HC:</td>
<td>Humanitarian Coordinator</td>
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<td>HP:</td>
<td>Hygiene Promotion</td>
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<td>Human Resources</td>
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<td>HRPI:</td>
<td>Humanitarian Response Plan</td>
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<td>IASC:</td>
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<td>International Committee of the Red Cross</td>
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<td>IFRC:</td>
<td>International Federation of the Red Cross</td>
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<td>IDP:</td>
<td>Internal Displaced People</td>
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<td>INGO:</td>
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<td>IOM:</td>
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<td>JRP:</td>
<td>Joint Research Program</td>
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<td>KII:</td>
<td>Key Informant Interview</td>
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<td>ME:</td>
<td>Middle East</td>
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<tr>
<td>MPC:</td>
<td>Multi-Purpose Cash</td>
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<td>MSF:</td>
<td>Médecins sans Frontières (Doctors Without Borders)</td>
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<td>NRC:</td>
<td>Norwegian refugee Council</td>
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<td>OCHA:</td>
<td>United Nations Office for the Coordination of Humanitarian Affairs</td>
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<td>ODF:</td>
<td>Open Defecation Free</td>
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<td>OFDA:</td>
<td>Office of Foreign Disaster Assistance</td>
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<td>OXFAM:</td>
<td>Oxford Famine</td>
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<td>QAAP:</td>
<td>Quality Assurance Assessment Program</td>
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<td>RC:</td>
<td>Resident Coordinator</td>
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<td>Red-R:</td>
<td>Register of Engineers for Disaster Relief (NGO)</td>
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<td>RRM:</td>
<td>Rapid Response Mechanisms</td>
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<td>REWA:</td>
<td>Regional Emergency Wash Advisors</td>
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<td>SDC:</td>
<td>Swiss Development Agency</td>
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<td>SDG:</td>
<td>Sustainable Development Goals</td>
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<td>SI:</td>
<td>Solidarités International</td>
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<td>SLTS:</td>
<td>School Lead Total Sanitation</td>
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<td>SOHS:</td>
<td>State of the Humanitarian System</td>
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<td>SOP:</td>
<td>Standards Operating Procedures</td>
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<td>StC</td>
<td>Save the Children</td>
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<td>UNDAC:</td>
<td>United Nations Disaster Assessment and Coordination</td>
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<tr>
<td>UNDP:</td>
<td>United Nations Development Program</td>
</tr>
<tr>
<td>UNHCR:</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>USAID:</td>
<td>United States Agency for International Development</td>
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<tr>
<td>WASH:</td>
<td>Water, Sanitation and Hygiene</td>
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<td>WASH IM:</td>
<td>Water and Sanitation for Health Information Management</td>
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<tr>
<td>WB:</td>
<td>World Bank</td>
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<tr>
<td>WEDC:</td>
<td>Water Engineering and Development Centre</td>
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<td>WHO:</td>
<td>World Health Organization</td>
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Without safe drinking water, good sanitation and hygiene, the situation of those affected by conflicts or disasters is made worse. The WASH sector is still struggling to do the basics: providing clean water and sanitation in contexts of mass displacement or when people do not have access to WASH services. It is not in a position to meet the many challenges ahead. Accelerated urbanisation, new epidemics, climate change, increased demographic pressure and technological risk will mean that people will have to pay a high price if WASH responses are insufficient. As such, the three main concerns for the WASH sector should be:

➔ 1) Providing “survival WASH” to crisis affected people.

➔ 2) Sustaining services and being able to scale them up to properly respond to the needs of large numbers of people stuck in hard-to-reach areas or displaced by protracted crises.

➔ 3) Preparing for the challenges ahead linked to climate change, toxic pollution of all kinds and the increased scarcity of water resources.

This study is based on more than 160 interviews (a quarter at HQ level and three-quarters in the field), more than 110 reports, articles and evaluations, 6 case studies (Yemen, Mali, DRC, South Sudan, Myanmar and CAR) and a web-based survey. The following initial findings, conclusions and recommendations have been prepared for discussion and further refinement. Though several findings concern weaknesses that are common to emergency response as a whole (insecurity, difficult logistics and unbalanced funding, bureaucracy and staff, etc.), when they affect the WASH sector they can have a significant impact on affected people due to the sector’s central role in relation to basic survival and public health. Other findings are specific to the WASH sector and therefore require a sector-specific approach.

MAIN FINDINGS

The emergency response capacity of the WASH sector is constrained by a series of factors including: security and access, logistics and aid bureaucracy, insufficient and inflexible funding and significant HR issues. Though there has been significant effort to improve coordination and ultimately to improve service quality and coverage, this has not always been successful.

In addition to common quality and programme management issues in difficult or hard-to-reach contexts, specific technical issues are making the WASH response even more complex: working in urban contexts; integrating gender and protection issues into WASH responses; anticipating and preparing for environmental and technological disasters; and the increased role of new aid delivery methods (cash and vouchers, subcontracting private services, etc.).
CONCLUSIONS

AT THE OPERATIONAL LEVEL

THE NEED FOR A TOOLBOX APPROACH

A toolbox approach to the full range of aid delivery methods (cash/voucher, private sector programme delivery mechanisms) is required. Currently, each method is looked at in isolation at the policy level, based on policy aspirations, but without an understanding of its relative appropriateness or how it can be optimally articulated with other methods to deliver durable humanitarian solutions. The rapidly changing world means that some methods can be less feasible whilst others become the only realistic option, depending on the context. What is more, in order to be able to use all these methods, agencies need to have a far broader range of skills and greater experience than most WASH staff currently have.

AT THE STRATEGIC LEVEL

SURVIVAL WASH: A FUNDAMENTAL ELEMENT OF CRISIS MANAGEMENT

People can survive a few weeks without food, a few weeks without shelter, several years without education, but without water, they will only survive for a few days. This is the basis for the concept of “survival WASH”. Of all the needs that crisis-affected people may have, access to water is an absolute priority. As such, protection is an overarching, cross-cutting principle.

Though there is recognition of the core contribution of the WASH sector, it is still not given enough strategic support. Its contribution to public health is essential, as underlined by epidemiological evidence. It is always vital to the functioning of human settlements in crisis zones, such as refugee camps, IDP settlements in urban and rural contexts, destroyed cities or remote areas where people are blocked and cannot escape. WASH is also essential to health institutions and the education sector, and increases dignity and quality of life, particularly for women as illustrated in the diagram below. And yet, too often, it remains a secondary priority.
IS THE WASH SECTOR FIT FOR PURPOSE GIVEN CURRENT AND FUTURE CHALLENGES?

This study provides a number of answers to the big questions raised in the introduction.

In view of the seriousness of the situation in many crises, does the WASH sector have the capacity to respond to existing needs?

Due to limited coverage (often “too little, too late”), and difficulties in delivering quality services, the WASH sector is struggling to respond properly and efficiently to needs, despite some progress due to the efforts of key actors. Sustained efforts will continue to be required from all stakeholders.

Is the WASH sector in a position to respond simultaneously to multiple crises?

In recent years, the WASH sector has had to respond to several crises in parallel. This was done as well as the people and institutions involved were able to do, but sometimes there was a lack of quality and staff wellbeing suffered. The WASH sector currently does not have the resources to cope with multiple level 2 or 3 disasters taking place at the same time in different parts of the world, and lasting a relatively long time.

Is the WASH sector fit for purpose in relation to coming challenges?

As a result of population growth and rapid urbanisation, wash systems in both rural and urban environments are finding it more and more difficult to deliver services. With the increasingly visible effects of climate change, including extreme weather events and droughts all over the world, there is increasing competition for water resources. Despite the impressive commitment of the WASH sector at all levels, it is not yet fit for purpose to face coming challenges.
RECOMMENDATIONS

The following recommendations aim to help the WASH sector to explore the way forward in more depth and suggest areas where donors, humanitarian agencies and WASH staff can collectively improve the current performance of the sector and its capacity to respond to new and complex challenges on a large scale.

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<thead>
<tr>
<th>Summary of the Key Recommendations</th>
<th>Timing</th>
<th>Target Audience</th>
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<tbody>
<tr>
<td>Survival WASH</td>
<td>Medium term</td>
<td>WASH sector and agencies</td>
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<td>Redefine and implement WASH as a</td>
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<td>Working in insecure contexts</td>
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<td>Donors, agencies</td>
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<td>Change agency attitudes to risk</td>
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<td>Donor engagement</td>
<td>Short term</td>
<td>Donors, GWC</td>
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<td>Engage donor leadership to give the</td>
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<td>WASH sector a prominent place in</td>
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<td>aid responses in contexts where it</td>
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<td>Surge capacity</td>
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<td>UNICEF, WASH sector, donors,</td>
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<td>Maintain expand core global and</td>
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<td>local capacity to surge and</td>
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<td>sustain responses and develop</td>
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<td>local capacities. Improve</td>
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<td>proactive availability and agile</td>
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<td>Strengthen core WASH capacity for</td>
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<td>rapid and sustained deployment.</td>
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<td>Develop planning capacity to deal</td>
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<td>with post-acute phase. Enhance</td>
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<td>and consolidate the level of</td>
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<td>preparedness.</td>
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<td>Proper funding</td>
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<td>There is a need to ensure fast,</td>
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<td>flexible and longer-term funding</td>
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<td>to ensure that WASH programmes</td>
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<td>respond to life-saving needs,</td>
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<td>remain relevant and are able to</td>
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<td>scale up in a sustainable manner.</td>
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<td>Coordination and coherence</td>
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<td>GWC to be more predictable. Core</td>
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<td>WASH agencies should work with</td>
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<td>WASH programme coherence and</td>
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<td>effectiveness.</td>
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<td>Ensure that WASH is approached in</td>
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<td>a multi-disciplinary manner</td>
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<td>Linking with other sectors (Health,</td>
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<td>Nutrition, Shelter, Food</td>
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<td>Security), but also cross-cutting</td>
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<td>issues such as protection, gender,</td>
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<td>environment, and the humanitarian-</td>
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<td>development nexus, is indispensable.</td>
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<td>Ready for the future</td>
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<td>WASH agencies need to be prepared</td>
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<td>for many new challenges and need</td>
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<td>to expand their capacity to</td>
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<td>undertake the full range of WASH</td>
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<td>aid delivery methods that may be</td>
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<td>necessary.</td>
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FULL REPORT
1. INTRODUCTION

1.1. OBJECTIVES OF THE RESEARCH

In many areas in crisis, the humanitarian WASH response is judged critically insufficient. This can contribute to public health crises (cholera outbreaks, large scale diarrheal outbreaks, vector-borne diseases) and high levels of acute malnutrition. The Terms of Reference (TOR) of this study stipulated that the team should explore a broad range of issues/challenges that many WASH sector actors believe limit the WASH response and contribute to a WASH gap.

The report includes recommendations about how to address, and when possible remove, some of the bottlenecks that have been identified. It also explores the question of whether or not the sector is ready to cope with new challenges linked to climate change (drought, extreme weather events, etc.), conflict over resources, increased urbanisation and the aggravated risk of toxic pollution affecting underground water.

The report includes three main parts: the first presents the diagnosis of whether or not there is a WASH sector capacity gap; the second presents the key issues that contribute to this gap; and the third includes a series of recommendations on how to address these issues.

1.2. METHODOLOGY

1.2.1. COMBINING DESK AND FIELD APPROACHES

The methodology is based on the requirements set out in the TOR (see annex N°1) and was refined during the inception meeting held in Geneva on 27/2/19 with the Steering Group (see list in annex N°8) and through regular meetings with the Management Group.

The analysis focused on two levels (annex N° 2):

- The global level, exploring the key the key factors determining capacity at the global level.
- The field level, based on country case studies (both full and ‘piggy-backed’). The list of countries was agreed with the Steering Group (see below).

This provided two points of view from which to analyse the issues/challenges highlighted in the TOR and determine whether or not there was a WASH capacity gap. The capacity of key WASH agencies was also mapped, distinguishing between different agency types and identifying good practices and obstacles encountered at the different levels of the WASH sector.

Annex N°4 presents the links between the findings and the sources of evidence.
In order to establish an informed view of the nature and magnitude of the difficulties encountered by the WASH sector and to produce constructive recommendations, the study had to:

- Explore and learn from other sectors, in particular Health, Nutrition and Food Security
- Develop an understanding of the capacity of other actors who play a role in improving WASH services (namely, national Government and municipal services, national civil society, and the private sector), in order to establish whether or not they can fill the gap.

A wide range of complementary sources was used:

- A literature review based upon submitted documentation and further documentation identified during the course of the study (120 documents consulted).
- Key informant interviews, at the global level as well as at the country level through the case studies (138 interviews.)
- A survey was used in a targeted manner to collect more information from key operational agencies.
- A desk review.

### 1.2.2. CASE STUDIES

The case studies agreed during the inception meeting were:

<table>
<thead>
<tr>
<th>Region</th>
<th>Middle East</th>
<th>Sub Saharan Africa</th>
<th>Asia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region</td>
<td>Middle income</td>
<td>More limited capacity in the governmental institutions</td>
<td>More urban</td>
</tr>
<tr>
<td>Characteristics</td>
<td>More urban</td>
<td>More rural context</td>
<td>High capacity Govt + civil society</td>
</tr>
<tr>
<td></td>
<td>Insecurity targeting international</td>
<td>Greater Govt self determination</td>
<td></td>
</tr>
<tr>
<td></td>
<td>organisations</td>
<td>High levels of insecurity</td>
<td></td>
</tr>
<tr>
<td>Full country visits</td>
<td>DRC</td>
<td>Bangladesh- Rohingya refugees</td>
<td></td>
</tr>
<tr>
<td>Limited country visits (piggy-backing)</td>
<td>Mali</td>
<td>CAR</td>
<td></td>
</tr>
<tr>
<td>Literature review</td>
<td>Yemen</td>
<td>South Sudan</td>
<td>Myanmar</td>
</tr>
</tbody>
</table>

**Case study selection**

### 1.2.3. FEEDBACK MECHANISMS

This study was carried out under a very dedicated Management Group and a dynamic Steering Group. Regular exchanges with them, from the kick off meeting to the final review of this report was highly appreciated. In addition, the preparation and presentation of the preliminary findings and recommendations during the Global WASH Cluster Partners Meeting in June 2019 and the subsequent Emergency Director Meeting was key to ensuring that there was proper ownership of the recommendations by the aid community.
2. HOW DO WE IDENTIFY WHETHER OR NOT THERE IS A GAP IN THE RESPONSE?

The starting point for this study was concern within the WASH sector about whether or not it was fit for purpose in relation to existing and coming crises. In July 2014, MSF published “Where Is Everyone?”, a series of three case studies of emergencies, specifically related to conflict and displacement (South Sudan/DRC/Jordan). This report highlighted a series of gaps in the Humanitarian sector in general. It was followed up by a specific issue of MSF’s “Emergency Gap” series on WASH\(^1\). The definition given by MSF of the emergency gap\(^2\) (see box) is an interesting starting point for this study.

MSF was not the only organisation that was concerned about this gap. UNICEF\(^3\) and a few other key agencies have also explored how to cope with the terrible consequences of a weak WASH response.

2.1. THE IMPACTS OF DELAYS IN THE RESPONSE

Late, irregular or regularly interrupted WASH operations have major consequences for crisis-affected populations. Managing the “time factor” can take different forms: responding rapidly in a new crisis in a new context; responding rapidly in a new crisis taking place in a context where there are already aid actors in the field; and, being able to scale up in a rapid and sustained manner in a protracted crisis context.

In the first type of situation, deployment and scale up to new responses is often not fast enough (first 3 months), in particular when it has to be done at scale. According to many Key Informant Interviews (KII), WASH actors who do not have money available immediately or who set up new operations outside of their normal operational zone need at least 2 to 3 months before becoming fully operational. This is even more critical when dealing with epidemic outbreaks when WASH interventions have to take place before the outbreak reaches its peak to be most effective and relevant. This often does not happen in difficult contexts, such as the recurrent cholera\(^4\) outbreaks in Yemen\(^5\). Consultation with a wide range of observers suggests that the overall response to the 2017 epidemic was too slow to scale up, unable to keep pace with the rapid escalation of the epidemic, and probably had a limited impact on its overall course. Over two thousand people are reported to have died from the disease since April 2017.

The recent establishment of Rapid Reaction Teams, manned by trained national staff and able to move faster to newly identified cholera hot spots, has demonstrated the importance of timeliness\(^6\).

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1 Evolution of emergency wash in humanitarian action, case study, Andrew Cunningham, June 2017, https://arhp.msf.es/emergency-gap-case-studies/evolution-emergency-wash-humanitarian-action-
2 Reflections and a call for action after a two-year exploration of emergency response in acute conflicts: bridging the emergency gap, Monica de Castellarnau and Velina Stoianova, April 2018
6 UNICEF, Evaluation of the UNICEF Level 3 response to the cholera epidemic in Yemen
According to UNICEF/WHO and the 2014 HRP analysis, Rapid Response Mechanisms (RRM) helped agencies to scale up responses in hard-to-reach areas where organisations with high capacity and experienced staff shared the responsibility for key sites. RRM could have been improved with pre-mapping of national actors and a Rapid Response Fund that was available/accessible. At first WASH activities were restricted to NFI distribution, then WASH RRM were extended to hardware + software activities. In 2018, the deployments of EP&R WASH partners were functional but challenging according to the national cluster. There were 64 deployments of only 6-7 WASH EP&R actors. Other reports that EP&R processes are increasingly cumbersome which has led to reduced decreasing effectiveness in recent the past years.

In contexts such as Yemen, Mali, CAR, DRC and South Sudan, the difficulty of rapidly assisting hard-to-reach or newly-displaced populations has led to the creation of Rapid Response Mechanisms (RRM). Although subject to improvement, these RRM have proven to be effective in delivering faster responses to small/medium-scale events taking place in protracted crises where humanitarian actors are already present.

2.2. THE IMPACT OF COVERAGE DIFFICULTIES
Despite efforts by OCHA and the WASH Cluster partners to identify gaps in coverage, there are still too many situations where vulnerable people's needs are not being covered.

It is a frequent feature of crisis response that a centre-periphery divide develops, with most agencies working where it is still relatively easy, and only a few in the hard-to-reach areas. Access constraints (security and logistics) frequently lead to limited reach or very uneven coverage of WASH needs, as was the case in Eastern Chad (where most actors were located around Goz Beida), in Mali (where there was very little coverage in the far north), in South Sudan (where logistical difficulties are enormous) and during the Haiti earthquake crisis where only a handful of organisations were able to work in the gang-controlled areas of Martissant and Cité Soleil.

The impact of this uneven coverage depends on whether the crisis concerns a city, a rural setting or a displacement crisis. The people living near the front in Yemen and in Syria have been deprived of even minimal access to water as military operations have destroyed water systems and aid actors have been unable to restore them. The situation can be even worse in war-affected urban contexts, as highlighted by the ICRC with regard to Sarajevo and Grozny, and more recently Aleppo and Mogadishu.

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7 See South Sudan Country Case: RRM and EP&R box
8 RRM: Rapid Response Mechanisms are by default mechanisms which allow fast and flexible deployment of funds
9 See South Sudan Country Case: RRM did WASH NFI distribution during first years of the crisis
10 IASC Real time evaluation of the Haiti earthquake response April 2010
And when water trucking is used to increase coverage, this quickly becomes very expensive. The case studies and interviews show that in hard-to-reach areas in Mali, CAR, Yemen, DRC, South Sudan, Chad and Niger, limited coverage led to difficulties in controlling disease outbreaks (see Yemen and DRC case studies), reduced population mobility and limited the rise of diarrhoeal diseases and subsequent high malnutrition rates (see Mali case study, but also recent evaluations on the Horn of Africa).}

2.3. THE IMPACT OF LOW QUALITY IN WASH OPERATIONS

The quality of WASH operations has a direct bearing on the capacity of people to stay in a given place, on public health and on providing a minimum of wellbeing. A high quality operation will respect national standards as much as possible when they exist, or the contextualized SPHERE standards when national norms are not available. On the other hand, there is general agreement among actors that low quality programmes can have a very negative impact:

- On health and nutrition:
  - Water contamination that has not been reduced by WASH programmes results in significant morbidity and loss of Disability-Adjusted Life Years (DALYs) (diarrhoal diseases, impact on child malnutrition). 58% of diarrhoeal diseases globally are due to a lack of basic water, sanitation and hygiene services. Malnutrition (undernutrition) is responsible for around 35 per cent of all deaths in children under the age of five worldwide. It is estimated that 50 per cent of this undernutrition is related to diarrhoea or repeated infestations of intestinal nematodes caused by unsafe drinking water, inadequate sanitation and/or poor hygiene conditions.
  - Inappropriate WASH management in health structures can lead to the rapid spreading of nosocomial diseases and difficulties in controlling secondary recontamination. According to the experience of the ICRC, when there is a low level of hygiene within hospital premises in war zones, the sterilization of surgical equipment becomes de-prioritized and the management of medical waste becomes a source of problems.
  - In several areas where WASH programmes are in place (in particular South Asia), ineffective management of water toxicity either due to natural conditions such as natural arsenic contamination in many parts of the world, or pollution linked to human activities or technological disasters, can cause significant health problems and make large areas unfit for survival.

- On inequalities and Gender-Based Violence:
  - WASH operations that are not based on a gender, diversity, risk and ‘Do No Harm’ analysis can have significant consequences for the security, dignity and well-being of specific groups (women, girls, the elderly, disadvantaged people, etc.).
  - Distant and unsafe WASH infrastructures are especially challenging for women and girls.

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17 WHO 2008. Safer water, better health: Costs, benefits & sustainability of interventions to protect promote health
18 https://www.who.int/water_sanitation_health/diseases-risks/en/
20 HELP Course, Dr Pierre Perri, ICRC Medical Division, Geneva
22 Sweetman C. & Medland. (2017) Introduction: gender and water, sanitation & hygiene, Gender & Development,
On education:

- There are assumptions that good quality WASH programmes in schools can have an incidence on school absenteeism even though this has not yet been confirmed with robust evidence. Of all the studies that were geared towards reducing absenteeism, gender was significant in 33% (n = 2) of the studies. The benefits of hand washing were more pronounced in females with the highest rates of absenteeism. Diarrheal incidences in children during their first few years of life have been shown to cause an IQ point reduction when they reach 7 to 8 years of age.

Several key informants underlined the fact that most studies dealing with L3 crises and protracted crises find that it is extremely challenging to achieve a high quality of water programming and sanitation programming. Monitoring quality in these contexts is very difficult and most programmes tend to be of medium to low quality. The WASH cluster is currently involved in developing quality control methods to ensure that programmes are as appropriate as possible, with specific efforts being made to ensure that context-specific use of the SPHERE Standards becomes the rule.

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3. HUMANITARIAN WASH SECTOR CAPACITY ANALYSIS

3.1. THE CHALLENGES AHEAD

The previous chapter underlined how serious a situation can become if the WASH sector does not have the capacity to respond properly to needs. Let us now turn to the main questions that this study will address:

- In view of the seriousness of the situations in many crises, does the WASH sector have the capacity to respond to existing needs?
- Is the WASH sector in a position to respond simultaneously to multiple crises?
- Is the WASH sector fit for purpose in view of the challenges ahead?

3.2. THE WASH CAPACITY OF IASC LEVEL AGENCIES

3.2.1. OVERVIEW OF MAJOR AGENCIES IN THE WASH SECTOR

The WASH sector, as defined here, consists of agencies that are part of the international humanitarian system, i.e. agencies that are represented at the IASC level (the WASH Cluster, plus the ICRC and MSF). National WASH capacity, which the sector complements in each different context, will not be analysed as part of this study. The capacity of the sector includes the operational capacity of major and smaller agencies, as well as the coordination capacity of the Cluster. The key agencies operate independently in keeping with their specific mandates, though the Cluster approach has improved coherence since it was introduced in 2006. Agencies therefore make decisions about their WASH (and all other) capacity independently of the sector as a whole. This is why the major agencies are analysed individually in this report, ensuring that individual agency capacity and decisions are not masked by overall sector changes.

The 2018 State of the Humanitarian System Report (SOHS) shows that humanitarian capacity (in the form of funds and number of staff) is distributed fairly evenly between the 3 types of IASC agencies (UN, Red Cross/Red Crescent Movement, INGOs). The table below presents different WASH agencies in terms of their scale (WASH funds spent over a 5-year period) and their mandates. Some of these funds are aimed at recovery/development action, as well as humanitarian action, so what appears in the table is WASH scale overall, rather than just emergency WASH. The roughly equal distribution of WASH funds between the UN, RC/RC and INGOs broadly matches the pattern for all sectors as shown by the SOHS data. The data used for the table comes from the GWC partnership report25 and, where marked by a *, from emails and survey data from agencies. It is provided to give a general idea of the sums involved, based on approximate figures. The figures for UNICEF/UNHCR/IOM are for funds which are then subsequently disbursed to INGOs, the Red Cross, national NGOs, etc. MSF funds are not broken down internally, with WASH as a separate sector, so it was not possible to establish the scale of their WASH activities. Agencies who spent less than $20million on WASH activities over the 5-year period are not included in the table below.

25 The baseline information is from the GWC Partnerships Report Final Draft, Jean McCluskey, 2016.
<table>
<thead>
<tr>
<th>Scale of agency WASH operations 2012-2016</th>
<th>UN and other Govt. agencies i.e. funders (provide materials and technical advice)</th>
<th>Implementing agencies with dominant emergency mandate</th>
<th>Implementing agencies with emergency, recovery and development mandate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large scale $&gt;$200 million</td>
<td>UNICEF (1,077) UNHCR (1,103)* GIZ</td>
<td>ICRC (755)*</td>
<td>IFRC (500)* Oxfam (350-450)* ACF26, ICRC (755)*</td>
</tr>
<tr>
<td>Medium scale $50-200 million</td>
<td>IOM (94)*</td>
<td>CARE 27, StC* (72)* World Vision, ACT Alliance</td>
<td></td>
</tr>
<tr>
<td>Smaller scale $20-50 million</td>
<td>WHO UNWRA</td>
<td>ACTED, IRC, NRC, Concern, Mercy Corps, DRC, MEDAIR, SI*</td>
<td></td>
</tr>
</tbody>
</table>

Table: Classification of main WASH sector actors by scale and mandate

It seems that there are only a handful of large-scale agencies, complemented by a range of critically important medium-sized agencies who have the relevant scale, culture and business systems (see below) to take on an active and globally predictable humanitarian role and provide core WASH capacity. These large and medium-sized agencies are responsible for providing the WASH sector surge and response capacity in the short and medium term when national capacity is unable to cope.

### 3.2.2. **GLOBAL REACH**

‘Global reach’ is used to describe whether agencies are able to predictably respond to a crisis anywhere in the world. Humanitarian agencies often respond when a crisis occurs within their operational area. However, when a crisis takes place outside this area, they may not respond due to their mandate or resource constraints. The ability to respond out of area depends on the agency's presence/scale and mandate (underpinned by its capacity to fulfil this mandate). Agencies that are work everywhere agencies can be considered to have a presence in every country, e.g. agencies such as UNICEF and national societies of the Red Cross/Red Crescent. Go anywhere agencies are fundamentally emergency agencies and are geared up to respond wherever and whenever they feel it is required, such as MSF and ICRC. Finally, dual mandate agencies are involved in longer-term development as well as emergencies, and will not necessarily commit to working in every location at all times, given they have to balance other considerations. Of course, large agencies such as Oxfam and Save the Children have considerable presence throughout the world, while smaller ones do not have such a broad reach, but all will carefully consider whether or not they will work ‘out of area’.

26 ACF could not provide financial data but assisted around 3.4million people in FY2013 & 6.2 million in FY2017.
27 Care could not provide financial data but assisted around 1.3million people in FY 2013 & 5.7million in FY 2017.
The table below sets out 3 mandate classifications in relation to the concept of *out of area*. It seems that a combination of agencies from the 3 categories is required to respond adequately in any location.

<table>
<thead>
<tr>
<th>Scale</th>
<th>Work everywhere agencies, so nothing is ‘out of area’</th>
<th>Go anywhere agencies, so ‘out of area’ does not exist</th>
<th>Dual Mandate Agencies, who sometimes work ‘out of area’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large scale &gt;$200 million</td>
<td>UNICEF, Red Cross/ Crescent</td>
<td>ICRC, IFRC UNHCR (focus on refugees)</td>
<td>Oxfam, ACF Int., GIZ</td>
</tr>
<tr>
<td>Medium scale $50-200 million</td>
<td></td>
<td></td>
<td>IOM, ACF-F, CARE, STC, World Vision, ACT Alliance</td>
</tr>
<tr>
<td>Smaller scale $20-50 million</td>
<td>WHO</td>
<td></td>
<td>PUI, International</td>
</tr>
</tbody>
</table>

* MSF is a ‘go anywhere’ agency, but its scale is not known.

Table: Comparing agencies outreach

Some top-line data was gathered looking at trends in WASH expenditure and staffing levels. The scale and growth of agencies helps illustrate the global reach of key agencies.

<table>
<thead>
<tr>
<th>Agency</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>% increase from the start year</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF Budget $</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>343% over 6 years</td>
</tr>
<tr>
<td>UNICEF WASH staff</td>
<td>450</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>160% over 9 years</td>
</tr>
<tr>
<td>UNHCR Budget $</td>
<td>150</td>
<td>236</td>
<td>229</td>
<td>232</td>
<td>256</td>
<td>293</td>
<td>248</td>
<td></td>
<td></td>
<td>165% over 6 years</td>
</tr>
<tr>
<td>UNHCR staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>126% over 5 years</td>
</tr>
<tr>
<td>IOM Budget $</td>
<td>5</td>
<td>11</td>
<td>18</td>
<td>22</td>
<td>38</td>
<td>60</td>
<td>69</td>
<td></td>
<td></td>
<td>1380% over 6 years</td>
</tr>
<tr>
<td>ICRC Budget CHF</td>
<td>126</td>
<td>151</td>
<td>181</td>
<td>201</td>
<td>206</td>
<td>227</td>
<td>244</td>
<td></td>
<td></td>
<td>161% over 5 years</td>
</tr>
<tr>
<td>ICRC int Wat/Hab staff</td>
<td>109</td>
<td>118</td>
<td>128</td>
<td>144</td>
<td>154</td>
<td>167</td>
<td>189</td>
<td></td>
<td></td>
<td>160% over 5 years</td>
</tr>
<tr>
<td>IFRC-RC/RC Budget $</td>
<td>4</td>
<td>1</td>
<td>10</td>
<td>5</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>152% over 5 years</td>
</tr>
<tr>
<td>Oxfam Budget $</td>
<td></td>
<td>70</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>22% over 5 years</td>
</tr>
<tr>
<td>Oxfam staff</td>
<td></td>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>25% over 5 years</td>
</tr>
<tr>
<td>MSF HQ staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>405% over 8 years</td>
</tr>
<tr>
<td>MSF WASH pool staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>438% over 4 years</td>
</tr>
<tr>
<td>ACF, no. of beneficiaries</td>
<td>2.2m</td>
<td>4</td>
<td>3.7m</td>
<td>3.4m</td>
<td>6.6m</td>
<td>28.4m</td>
<td>5.8m</td>
<td>6.2m</td>
<td>8.9m</td>
<td>405% over 8 years</td>
</tr>
<tr>
<td>Care no. of beneficiaries</td>
<td>1.3m</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4.9m</td>
<td>5.7m</td>
<td></td>
<td>438% over 4 years</td>
</tr>
<tr>
<td>StC Budget $</td>
<td></td>
<td>2</td>
<td>8</td>
<td>12</td>
<td>20</td>
<td>30</td>
<td>47</td>
<td></td>
<td></td>
<td>2350% over 5 years</td>
</tr>
<tr>
<td>NCA Budget $</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>15% over 5 years</td>
</tr>
<tr>
<td>Solidarités Budget $</td>
<td></td>
<td>24.7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>172% over 5 Years</td>
</tr>
</tbody>
</table>

Table: comparing agencies financial capacity
A snapshot of data was collected on key agency presence with work on emergency WASH (scale not determined) in IASC L3 emergencies in 2013, 2015 and 2017 to verify the actual reach of agencies and commitment to respond in L3 crises in particular. (This does not include whether agencies had a programme in location prior to the crisis, so does not necessarily mean these are ‘out of area’ responses.)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>UNHCR</td>
<td>Yes</td>
<td>Limited</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>IOM</td>
<td>No</td>
<td>Limited</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>ICRC</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>IFRC-RC/RC</td>
<td>Limited</td>
<td>Yes</td>
<td>No</td>
<td>Limited</td>
<td>Limited</td>
<td>Limited</td>
<td>No</td>
</tr>
<tr>
<td>Oxfam</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>MSF</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>ACF</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Care</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>StC</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Limited</td>
<td>Yes</td>
<td>Limited</td>
<td>Limited</td>
</tr>
<tr>
<td>NCA</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Solidarités</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes (2017)</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Table: Agencies’ presence in crisis area

A number of observations can be made regarding this data:

i. UNICEF, IFRC and the Red Cross-Red Crescent system are key, large-scale, work everywhere actors who always have the capacity to respond and will form part of the backbone of the response IF they have maintained their surge capacity and a can-do approach in country.

ii. ICRC and UNHCR are large-scale, go anywhere (conflict) actors, who are key components of the sector’s surge capacity in conflict areas (MSF scale unknown, but they are likely to take action).

iii. Among the dual mandate actors, Oxfam is particularly important because of its scale and its broad reach through its long-term development presence. However, Oxfam may not choose to respond everywhere in the future.

iv. The medium-scale dual mandate agencies, such as IOM, ACF, CARE, StC, SI, World Vision and ACT Alliance, are all critical components of a system, but clearly some of these agencies cannot and will not respond everywhere.

Some of the biggest agencies have drastically expanded their WASH programmes. However, the limited data on mid and senior staff that is available suggests that HR capacity has not grown to the same extent.
3.2.3. HUMAN RESOURCES

Human resources are a key ingredient of capacity. This concerns regional and HQ surge capacity. However, it is important to note that the human resources required to deliver and sustain an emergency WASH programme will draw from in-country WASH staff, along with the management, logistics and finance staff who underpin the capacity to deliver WASH programmes. It is critically important that WASH actors help to prepare local staff within country offices, but this is underdeveloped in most institutions.

Furthermore, although the quality of local actors can vary a great deal, if they implement programmes rather than INGOs, effective WASH capacity is increased. Agencies such as UNICEF and UNHCR also rely on standby mechanisms, drawing from rosters for their surge capacity, while all agencies have ad hoc contract staff, on which there is little data available (see annexes for full details from surveys and interviews conducted). It is also useful to consider data from the 2018 SOHS report to put WASH in context: “In 2017, the total combined field personnel of the humanitarian sector numbered approximately 570,000. This represents an increase of 27% from the last SOHS report (450,000 in 2013). Growing numbers of national humanitarian workers appear to be behind this increase, while the number of international (expatriate) staff has remained stable.”

<table>
<thead>
<tr>
<th>HQ and regional surge capacity</th>
<th>WASH staff on international contracts deployed in programme</th>
<th>Emergency WASH training</th>
<th>WASH scale/capacity trends over time</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNHCR</td>
<td>126</td>
<td>WASH In Emergencies (with UNICEF), Annual WASH Officer training (general training for WASH staff covering both emergency and development WASH), Hydrogeological Training (technical training for staff)</td>
<td>Increase more or less in line with expenditure increase.</td>
</tr>
<tr>
<td>IOM</td>
<td>Approx. 35 - 40</td>
<td>WASH is part of general emergency training</td>
<td>Spend increased over 7 times between 2012-16</td>
</tr>
<tr>
<td>ICRC</td>
<td>In 2013: 118 WASH staff deployed. In 2018: 189. Vacancy rate for Junior and senior staff below 5% at all times.</td>
<td>Large online training platform with IFRC. Annual F2F courses co-organized with Bioforce, Bushproof, CHYN, OIEau, Grundfos, EPFL.</td>
<td>More than 50% increase in internal WASH programme staff in 5 years.</td>
</tr>
<tr>
<td>IFRC</td>
<td>Internal rosters of ERUs 500-1000</td>
<td>RDRT and ERU trainings</td>
<td>Overall consistent with some regional variations</td>
</tr>
</tbody>
</table>

"The WASH sector struggles to move out of its comfort zone, assessments and response targets are carried out in easy-to-reach areas where the response can be tailor-made. This creates competition amongst organisations, and results in areas which are highly covered and others where there is no one"

Humanitarian worker
Staffing for WASH coordination.

Cluster coordination capacity is essential, but in many crises, when the WASH sector is under-resourced, it cannot be deployed. In conflict/refugee situations, there is tension between UNHCR-led coordination and the OCHA-led Cluster system which leads to competition over coordination staff.

- **Dedicated WASH cluster coordination capacity** was introduced in 2006 with the Community Approaches to Total Sanitation (CAST) system and part-time Regional Emergency Wash Advisors (REWAs). There were about 5 Full Time Equivalent (FTE) positions in 2006. In 2019 there are 13 FTE CAST and FST positions, which is a significant increase in capacity.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Staffing Details</th>
<th>Capacity Details</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxfam</td>
<td>WASH Advisors: 9 HQ, 2018: 7 HQ, +5 regional WASH advisers. In 2013:16 Public Health Engineers and 8 Public health promoters. In 2018: 15 Public Health Engineers and 7 Public health promoters.</td>
<td>WASH staff in programme not surveyed. 25% to 50% vacancy gaps for senior positions. Very difficult to find good calibre people for Yemen, CAR.</td>
<td>Largest pool of mobile/emergency engineers and hygiene promoters. Drop in capacity at HQ and HSP surge over last 5 years.</td>
</tr>
<tr>
<td>MSF all operational centres</td>
<td>25 HQ WatSan and Environmental Health Advisors - people who are deployable at any time in HQ (9 additional flying WATSAN on one-year multi-year contracts)</td>
<td>Regular WASH pool of up to 105 WatSan and Environmental Health Advisors in the field in 2018.</td>
<td>Multiple general WASH and specialist WASH courses totalling around 170 people trained each year. Increased capacity in WASH surge. Overall, MSF believes this to be the appropriate level to respond to all types of emergencies.</td>
</tr>
<tr>
<td>ACF</td>
<td>1 global WASH specialist, 4 regional, 1 FST coordinator (Global WASH Cluster).</td>
<td>“ACF is typically able to fill WASH jobs.” In-house training used to be delivered.</td>
<td>Strong shift in 2018/2019 to increase preparedness and work more through local partners in the event of an emergency. This means global WASH traditional surge capacity is depleted. The agency essentially relies on internal/external rosters for emergency deployment.</td>
</tr>
<tr>
<td>CARE</td>
<td>4 (+5 dev staff). At least 10, perhaps more.</td>
<td>Not on a regular / scheduled basis.</td>
<td>Staff levels have fluctuated a little, but are more in line with large emergencies than other factors.</td>
</tr>
<tr>
<td>StC</td>
<td>4 Global Advisors, 2 Regional Advisors, and 4 Humanitarian WASH Surge Staff.</td>
<td>Emergency WASH modules for entry level WASH staff. Mid-level emergency WASH training for the Syria response.</td>
<td>Rapid initial growth from 2012 then reduction despite massive continued WASH programme increase</td>
</tr>
<tr>
<td>NRC</td>
<td>3-5 WASH staff at HQ/region.</td>
<td>Very few international WASH staff at the country level, partially out of principle. Under the MFA framework agreement budget every year for roughly three trainings.</td>
<td>Emergency WASH started/expanded in 2012 with MFA agreement. A shift from providing services to facilitating access, with an increase in budget to support this.</td>
</tr>
<tr>
<td>Solidarités</td>
<td>1 Emergency response Team, including 1 WASH Coordinator.</td>
<td>Numerous outside training sessions and opportunities.</td>
<td></td>
</tr>
</tbody>
</table>
Since 2015, the cluster has a standby agreement with REACH for the implementation of needs assessment and response monitoring, which represents a new capacity boost for coordination.

Over the past 12 years, WASH Cluster coordination training has been run on an ad hoc basis (when funds are available) with staff from UNICEF, governments and NGOs being trained.

### 3.2.4. BUSINESS SUPPORT AND LOGISTICS

In order for agencies to be able to surge and sustain emergency WASH responses, a number of key elements need to be in place. To a great extent these will be shaped by the organisation mandate, and whether it works out of area (see above).

Key factors considered:

- When the agency has a dual development/emergency mandate, does it have emergency business systems that permit short-cut/rapid decisions to be made about procurement, HR and grant making?
- Do agencies have their own in-house emergency surge funds (a type of CERF equivalent)? These are likely to be multi-sector, and so are not necessarily allocated to WASH, but this varies. E.g. Oxfam will spend a high % on WASH, MSF sees WASH as part of Health, UNICEF funds many sectors, etc.
- Do agencies have the means to procure and deliver emergency WASH items? This depends on the availability of global/regional stocks, though in-country stocks and/or pre-agreements with suppliers are good alternatives. WASH responses are hardest in countries where local markets are weak. Global/regional stocks are more critical in these contexts and should be considered a useful resource.

With respect to core HR WASH capacity there is a mixed bag of responses. In the past 5 years, agencies like ICRC, MSF and Save the Children have expanded overall in terms of their number of core staff (ICRC/MSF in terms of profiles as well). ACF has shifted its focus to preparedness by reinforcing links with local partners and discontinuing the emergency surge team. IFRC has a small team in Geneva, its main surge capacity being with Participatory Red Cross societies (with the Emergency Response Units - ERU) and its network of Wash staff members of National societies who can be developed through the Regional Disaster Response Team. UNICEF has noted that its own internal surge mechanisms are key to the delivery of WASH responses and have trained more than 800 staff on their ‘WASH in Emergencies’ course since 2009. IOM is still a relatively new player in the sector but has increased its staff by 3 at HQ and is deploying more and more people in the field, though it has had difficulty finding the right technical profiles. Lastly, the ICRC has significantly increased and diversified the profiles of its core staff in order to be better equipped to deal with large-scale urban crises.

In Cox's Bazar district in Bangladesh, the largest, most overcrowded and hilly refugee camp in the world, populated by a deeply conservative refugee population that places massive restrictions upon its women, getting latrines that worked for women and vulnerable groups was always going to be a near impossible task. This solution along with the supporting Hygiene Promotion programme, in general failed to meet the needs of many (perhaps 40% then then WASH CC said, adolescent girls and women, Collective latrines in response to the scale of the task were rolled out.
Accessing water in a rehabilitated water point in Port of Prince (Haiti)
### Table: disaster preparedness level

<table>
<thead>
<tr>
<th>Organization</th>
<th>Emergency business systems</th>
<th>In-house emergency surge funds</th>
<th>Emergency stocks</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF</td>
<td>Internal reserve L3 procedures</td>
<td>USD 75 Million EPF</td>
<td>Large global stocks in Copenhagen.</td>
</tr>
<tr>
<td>UNHCR</td>
<td>Emergency fast track procedures which apply for the first six months after an emergency declaration.</td>
<td>USD 10 million quick release fund to kick start any response.</td>
<td>Approx. USD 10 million for 200,000 people.</td>
</tr>
<tr>
<td>IOM</td>
<td>IOM corporate emergency activation (and IASC Humanitarian System-Wide Scale-Up protocols).</td>
<td>Reimbursable emergency loan mechanisms for country offices to immediately respond.</td>
<td>WASH Stocks in Nairobi, for 5,000 people.</td>
</tr>
<tr>
<td>ICRC</td>
<td>ICRC can mobilise a budget extension as soon as the situation requires. Internal and external constraints are making it more complicated to deploy additional staff quickly. ICRC is working on procurement emergency SOPs to reduce the time required to launch a response.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IFRC</td>
<td>Not really.</td>
<td>DREF (disaster relief emergency fund). Approx. 5-10 million CHF for small emergencies and pump priming start of a large response.</td>
<td>A modest amount of WASH stocks, some in Dubai. Main emphasis is on WASH disaster response kits for 2-5k people. There are about 10 preparedness stocks around the world.</td>
</tr>
<tr>
<td>Oxfam</td>
<td>Use of minimal procedures for project approval, HR, procurement.</td>
<td>Significant “catastrophe” funds.</td>
<td>Significant UK stocks.</td>
</tr>
<tr>
<td>MSF</td>
<td>Accelerated administrative processes with the emergency department. Sometimes long processes reported in decision making.</td>
<td>Yes.</td>
<td>Logistic platform in Bordeaux, France – (development of kits). Logistic platform in Dubai. EPREP stock in the capital of each mission.</td>
</tr>
<tr>
<td>ACF</td>
<td>Procurement/recruitment procedures that allow for derogations.</td>
<td>Medium-size emergency fund that can be deployed in 12h upon agreement between the Directors of Emergencies and Operations.</td>
<td>Has a global logistics unit plus logistic platforms in France and UAE.</td>
</tr>
<tr>
<td>CARE</td>
<td>Emergency procedures covering all standard program support functions. Need to be signed off at country/ regional level.</td>
<td>Allocates +/- $1million/year between approximately 20 responses.</td>
<td>WASH material was kept with UNHRD in Dubai to the value of around $200,000 per year, but this discontinued in the last year.</td>
</tr>
<tr>
<td>StC</td>
<td>Simplified tender procedures, recruitments, financial and logistic rules, mainly for operational support teams.</td>
<td>CEF (Central Emergency Funds) based on UK appeals and CSF (Central Seeds Funds).</td>
<td>Main stocks UNHRD in Brindisi. Regional in Panama, Dubai, Kuala Lumpur, and the Philippines.</td>
</tr>
<tr>
<td>NCA</td>
<td>There are no shortcuts specifically for emergency response, but there are clauses for making things quicker (e.g. derogations on single sourcing).</td>
<td>A couple of relatively rapid funding mechanisms.</td>
<td>WASH stock in Oslo and some in Dubai (at the HRD).</td>
</tr>
<tr>
<td>SI</td>
<td>Accelerated administrative process, security management</td>
<td>Small emergency fund for context/crisis analysis</td>
<td>Small pre-positioned stock in Dubai.</td>
</tr>
</tbody>
</table>
### 3.2.5. AID DELIVERY METHODS

WASH organisations use a number of different methods to deliver assistance (see table below). Their preferred way of working is influenced by their mandate, and their capacity is adapted accordingly. The table below summarises the different methods, who uses them and trends in their use. It is clear that the ability to be proficient in all of these methods will be a key determinant of an agency’s ability to respond flexibly and effectively in an ever more complex and urbanised world.

<table>
<thead>
<tr>
<th>Aid delivery method</th>
<th>Comments</th>
<th>Trends in use of methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct delivery of services</td>
<td>Dominant response modality for MSF. Other NGOs also use this modality.</td>
<td></td>
</tr>
<tr>
<td>Delivery of services through (not for profit) partners (localisation)</td>
<td>More common for INGOs that work in both development and emergencies.</td>
<td></td>
</tr>
<tr>
<td>Delivery of services through contractors (primarily local)</td>
<td>ICRC implements round 50% of its work in this way.</td>
<td></td>
</tr>
<tr>
<td>Working through national/municipal governments to deliver services</td>
<td>UNICEF has a regular (development) programme with government counterparts and will often support governments in crises. ICRC often works with governments. INGOs do so on an ad hoc basis.</td>
<td></td>
</tr>
<tr>
<td>Cash and vouchers</td>
<td>WASH agencies are building experience but expertise varies and needs strengthening.</td>
<td></td>
</tr>
</tbody>
</table>

Table: Delivery modalities

The capacity to deliver assistance using all these methods requires a broader skill set than many agencies have hitherto developed. Though these are not based on quantifiable data, the following observations can be made:

- There is an increased amount of funding being channelled through cash/voucher programmes, with further expansion planned by ECHO/DFID. The capacity to implement this delivery method needs to be made available to key WASH sector agencies.
- Use of contractors is likely to be more appropriate and prominent in urban environments.
- Some organisations may not have the relevant competencies to manage contractors effectively.
- There is no sector-wide/systematic work being undertaken on the management of contractors. The absence of sector-wide standards and clarity on this issue make it hard to ensure quality.
- Most agencies do not have experience of working closely with municipal governments and utilities though this is critical in urban areas (UN Habitat is aware of this). UNICEF typically works with their government line ministry counterpart, but not systematically at the municipal level.
3.3. EMERGING NEW PLAYERS

It is important to take note that specific groups may not be included in pooled plans/fund mechanisms, e.g. HRP and/or government plans. Local and international civil protection bodies, military forces and even the private sector are regularly among the key - but forgotten - players in the WASH sector (see After Action Review on Indonesia\(^{28}\) and the RTE in Haiti after Hurricane Matthew).

### 3.3.1. THE GROWING ROLE OF CIVIL PROTECTION FORCES

Over the last few years, the role of Civil Protection forces has been growing in large-scale WASH emergency responses, although this is still principally in large-scale disasters triggered by extreme weather events with the United Nation’s Disaster Assistance and Coordination (UNDAC).

The enhanced capacity of the European Emergency Response Centre (EERC) and its financial tools that are able to fund and send heavy WASH equipment\(^{29}\) all over the world, was clearly observed after Hurricane Matthew in Haiti, the recent Tsunami in Palu, Indonesia\(^{30}\), and Cyclone Idia in the Eastern Indian Ocean region. In addition, there is clear evidence of the growing role of national and regional Civil Protection mechanisms in South and Southeast Asia (with the growing capacity of the Asia Humanitarian Action Centre), in the Indian Ocean, in the Caribbean region\(^{31}\) and in Latin America\(^{32}\).

### 3.3.2. THE PRIVATE SECTOR: A LARGELY UNTAPPED RESOURCE

In many contexts, the main collaboration between the WASH system and private actors concerns water trucking (working with local water companies and truck owners). Local private WASH actors, on the other hand, represent a major but largely under-exploited resource. On the other hand, it is important to recall the fact that one of the key factors that allowed cholera to spread much faster in Haiti was the multitude of small private producers of potable water through inversed osmosis. In several other disasters, local businesses have mobilised their own funds to procure and distribute bottled water, in addition to blankets, tarpaulins and other Non-Food items (NFI).

Global private companies involved in water service delivery worldwide, such as Veolia, have set up small philanthropic Foundations that contribute in kind or financially to many WASH responses (such as in Beni in DRC with Solidarités International for the management of cholera outbreaks\(^{33}\)), and in Haiti (post-Hurricane Matthew\(^{34}\)).

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\(^{29}\) [https://www.euwu2016.org/about](https://www.euwu2016.org/about)


\(^{31}\) [https://www.cdema.org/](https://www.cdema.org/)

\(^{32}\) [https://ahacentre.org/](https://ahacentre.org/)


3.3.3. MUNICIPALITIES, WATER BOARDS AND LOCAL WASH SERVICE DELIVERY: THE OTHER FACET OF THE LOCALISATION AGENDA

The fact that disasters and war are affecting urban contexts more and more frequently has made the whole system realise the importance of local governments, municipal administrations and related WASH institutions. ICRC has been a pioneer in this area, having worked with these actors during the siege of Sarajevo and in Iraq in the 1990s. It took decades for the rest of the aid system to understand the importance of these local actors, who, unfortunately, continue to be ignored too often in the localisation debate, which is disproportionately focused on NGOs.

In many war-torn middle-income countries, municipal actors are key stakeholders in the WASH sector. They are often among the few actors who know how to manage WASH in their specific technical and socio-economic environment. Until recently, their presence and know-how was often overlooked, leading to many mistakes and difficulties. Their principle needs are fuel supply, spare part provision and technical advice.

Water trade in Mogadishu

36 IASV Real Time Evaluation of the 2010 Haiti earthquake, Groupe URD/GPPI
39 Abijan Report, 20011, Groupe URD
4. WASH SECTOR: CAPACITY UNDER THREAT

4.1. LOSING ACCESS

According to the 2018 SOHS report and several other studies\(^{41}\) on war dynamics, the number of armed conflicts has increased significantly in recent years\(^ {42}\). The nature of crises is also evolving, with protracted crises characterised by longevity, intractability and immutability. These usually involve both immediate direct suffering as a result of attacks, deprivation and displacement, and indirect suffering due to the cumulative deterioration of basic services, reduced life expectancy and livelihoods.

Violations of international humanitarian law are on the rise, which also has an impact on the safety of humanitarian workers\(^ {43}\). In some contexts, such as Yemen, a specific mechanism to notify field movements has been established to ensure that military forces limit the risk of collateral damage. In many cases, however, transferring information to the military would create additional risks and aid agencies tend to limit their mobility. Health structures have frequently been hit by air strikes when located close to active frontlines.

Another important development is the increasing number of parties involved in each conflict as seen in DRC, Mali\(^ {44}\) and CAR\(^ {45}\). Asymmetric warfare and violent radicalism have resulted in a sharp reduction in access to territories and their populations due to a deterioration in the security situation, although some agencies (ICRC and MSF in particular) have managed to negotiate access with armed groups and continue their operations in some of these difficult contexts (Mali, CAR, South Sudan). In most cases, humanitarian actors, including those in the WASH sector, have so far been spared by radical groups. However, some parties are hostile to international actors, and this can affect all humanitarian actors including those from the WASH sector, an example of this being the assassination of Ricardo Munguia, ICRC WASH, in Afghanistan, in March 2003.

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\(^{41}\) [https://centreforsafety.org/](https://centreforsafety.org/)

\(^{42}\) State of the Humanitarian System 2018 “the number of people forcibly displaced by conflict and violence has also increased to 68.5 million in 2017”

\(^{43}\) [https://aidworkersecurity.org/](https://aidworkersecurity.org/)

\(^{44}\) Interviews with INSO Mali

\(^{45}\) Interviews with INSO CAR
4.2. FUNDING

4.2.1. GLOBAL TRENDS

All funding data in this section is drawn from the Financial Tracking System (FTS), which provides a partial, though significant picture. Some funding is part of UN-led appeals, such as the Humanitarian Response Plans (HRPs), while some is from other sources, making comparisons with the FTS and HRP data complex. Finally, some funds that are classified as multi-sector will go to WASH, but as these are not quantified, they are not included below. All figures and commentary should thus be considered as indicative.

The capacity of the WASH sector over the last 10 years can be compared with trends in other sectors since 2008, as shown in the graph below from the 2018 SOHS report. The UN appeals included here are used as a crude proxy for needs. Appeal requirements have gone from about $8 billion in 2008 to about $26 billion in 2017, i.e. more than a 3-fold increase (not adjusted for inflation).

UN-led appeals increased more than 3-fold from 2008 to 2017. The amount of funding required to meet essential needs through HRPs increased from $17.3 billion in 2014 to $24.9 billion in 2018\(^{46}\) (an increase of 140%). The FTS data in the graphs below provides a picture of basic service sector funding (ETC, logs etc. omitted for the clarity of the graphs). See annex 4 and annex 5 for more details.

There have been similar trends in WASH funding, as can be seen in the graph below:

\(^{46}\) UNOCHA GNO 2019 [online]
A series of key observations can be made based on these graphs;

- All sectors face significant funding shortages as a % of appeals, though this varies depending on the location, crisis type and phase (global data not available to illustrate and understand more about these variations except location which is looked at through country level data – see below).

- As a % of WASH appeals, WASH funding has dropped from about 48% to 42% over the 2014-2018 period and remains relatively stable at this level. The shortfall is thus significant (often the case for many sectors) and has increased over the period.

- The Health sector has seen a big drop over the 5-year period, but the relatively high levels of funding for health in 2014 is partly linked to the Ebola crisis in West Africa.

- It should be noted that some WASH funding has been channelled through other sectors, such as Health for the Ebola response in DRC, for instance, or, as noted above, through multi-sector funding, e.g. for cash/voucher programmes.

Global overview funding 2014 – 2018 per sector in million USD (source: FTS)
Global Percentage of met appeals per sector (Source: FTS)

Important: data over 100% has been changed to 100% for scaling purposes

It is useful to examine funding at the country/case study level in order to understand if country level patterns mirror the global level trends. (Detailed graphs showing trends over time are available in the annexes.)

<table>
<thead>
<tr>
<th>Country</th>
<th>$million WASH funding requested through appeals from 2013 to 2018</th>
<th>Average % coverage of WASH appeal over the 6 years</th>
<th>Comments drawn from country KII</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mali</td>
<td>202</td>
<td>17.3%</td>
<td>Funding stated as a constraint.</td>
</tr>
<tr>
<td>CAR</td>
<td>216</td>
<td>30%</td>
<td>Funding stated as a constraint.</td>
</tr>
<tr>
<td>South Sudan</td>
<td>734</td>
<td>60%</td>
<td>Fear of donor fatigue. Start of decrease in 2017 (from 63% to 37%)</td>
</tr>
<tr>
<td>DRC</td>
<td>498</td>
<td>24.7%</td>
<td>Issues of efficiency due to major physical and security constraints and the short length of funding cycles were mentioned rather than the availability of funds.</td>
</tr>
<tr>
<td>Yemen</td>
<td>871</td>
<td>47%</td>
<td>Issues of efficiency due to major physical and security constraints and the short length of funding cycles were mentioned rather than the availability of funds.</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>210</td>
<td>33%</td>
<td>Fund mobilisation was not cited as a significant problem.</td>
</tr>
<tr>
<td>Myanmar</td>
<td>146</td>
<td>66%</td>
<td>Fund mobilisation was not cited as a significant problem.</td>
</tr>
</tbody>
</table>

WASH funding in the case study countries excluding ICRC and MSF
While overall humanitarian contributions grew over the period 2013-2018, the shortfall between requirements and contributions to UN-coordinated appeals also increased for all sectors\(^7\). For WASH, the % of fund coverage has dropped somewhat over the period, but there are significant disparities between countries. In CAR, South Sudan, Myanmar and Bangladesh, the coverage of appeal requirements has clearly decreased over the past 2 to 4 years. In DRC, Mali and Yemen, it has been irregular.

It is important to consider the impact of both the limits of appeals, i.e. needs versus targeting, and funding shortfalls, on the number of people targeted but not receiving support due to lack of funds. A crude understanding can be provided by taking a snapshot in 2018 and considering the UN-led appeals (HRP or others), the number of people these do not target, and those that the funding shortfall could not cover. Of course, this does not take into account other funds not listed on the FTS, remittances, etc., so these figures might be a significant over-estimate of unmet needs.

<table>
<thead>
<tr>
<th>Countries</th>
<th>% coverage of WASH appeal in 2018</th>
<th>2018 appeal - population identified as having WASH needs</th>
<th>2018 appeal - people targeted for WASH assistance</th>
<th>People reached</th>
<th>Approx. number of people with unmet needs based upon those not targeted and those targeted that did not receive support due to appeal shortfalls</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mali</td>
<td>19%</td>
<td>0.91 M</td>
<td>0.91 M</td>
<td>280 800</td>
<td>629 200 Total unmet WASH needs</td>
<td>Humanitarian Response Plan (January-December 2018) Bulletin humanitaire Mali Mid-November - December 2018</td>
</tr>
<tr>
<td>CAR</td>
<td>20%</td>
<td>2.5M</td>
<td>1.7M</td>
<td>804 000</td>
<td>1 696 000 Total unmet WASH needs</td>
<td>2018 Response Plan / BULLETIN EHA - RCA January-March 2018 *Annual Review 2018</td>
</tr>
<tr>
<td>South Sudan</td>
<td>37%</td>
<td>5.3M (excl. 0.3m refugees)</td>
<td>3.3M (excl. 0.3m refugees)</td>
<td>2.02 M</td>
<td>3.28 M Total unmet WASH needs (excl. 0.3m refugees)</td>
<td>2018 Humanitarian Response in Review UNICEF -Cluster Leads Annual Report 2018</td>
</tr>
<tr>
<td>DRC</td>
<td>26%</td>
<td>Multi year</td>
<td>Multi year</td>
<td>Multi year</td>
<td>Multi year</td>
<td>Humanitarian Response Plan 2017-2019 - Updated for 2019</td>
</tr>
<tr>
<td>Yemen</td>
<td>64%</td>
<td>16 M</td>
<td>11.1 M</td>
<td>11.5 M</td>
<td>4.5 M Total unmet WASH needs</td>
<td>Humanitarian Response Plan January-December 2018 Humanitarian Response Plan - 2018 In Review</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>26%</td>
<td>1.3 M</td>
<td>1.4 M</td>
<td>1.0 M</td>
<td>1.0 M Total unmet WASH needs</td>
<td>Humanitarian Response Plan - 2018 In Review</td>
</tr>
<tr>
<td>Myanmar</td>
<td>29%</td>
<td>0.8 M</td>
<td>0.5 M</td>
<td>0.6 M</td>
<td>0.6 M Total unmet WASH needs</td>
<td>Humanitarian Response Plan - 2018 In Review</td>
</tr>
</tbody>
</table>

**Table: Funding and coverage**

Over the last decade, humanitarian funding has become increasingly concentrated around a small number of countries. The 2018 SOHS Report indicates that 10 countries receive 60 % of total humanitarian funding and most funding continues to be absorbed by long-term emergencies. Though the funding available for humanitarian operations significantly increased in the Middle East (Yemen,

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Syria, Iraq), it decreased dramatically for countries in sub-Saharan Africa\(^48\). In these situations, it is difficult to ensure basic predictability and to maintain the capacity to respond quickly to events taking place in parallel to the main crises.

Several global mechanisms have emerged to improve the timeliness of funding via internal processes, such as the CERF emergency window, and the L3 / L2 UNICEF protocols. Another interesting mechanism is the IFRC’s Disaster and Relief Emergency Fund (DREF). As the DREF is regularly replenished by donors to be used for the many small- to medium-scale disasters that take place regularly, it is a key source of “seed money” to start operations in the field while appeals are prepared and presented to donors.

Agencies that do not have their own resources can do nothing more than walk the corridors and into meetings in assessment mode until funding finally arrives. As such, the START Network’s rapid funding window, which is proactively financed by several donors, is an interesting innovation that can be mobilised for WASH activities when these are needed in the field. The capacity to scale up often depends on the availability of non-earmarked internal funds (MSF, the ICRC and some NGOs) or trust-based agreements with donors that ensure that funding is available for rapid response mechanisms like EP&R in South Sudan.

As we can see in the graph below, funding for the WASH sector has been consistent over the past 5 years although it is one of the sectors which receives the least overall funding. Globally, WASH is one of the sectors that is regularly faced with insufficient funding, despite its critical importance. Over the past 5 years, only 45% of WASH sector funding requirements have been covered on average, which is comparable to many other sectors such as Logistics, Telecommunications, and Coordination mechanisms.

The relation between funding and needs varies from country to country. In Mali and CAR, fund mobilisation was cited as a significant problem, but this was not the case in DRC, Bangladesh and Myanmar. As the delivery of services in IDP and refugee camps is highly dependent on external/international funds, funding will continue to be required in the future if services are to be maintained. In South Sudan, there is a clear fear of donor fatigue from actors. Since 2017, WASH funding has been decreasing slightly. Hopes that the peace treaty will attract development funding are already fading. It is worth mentioning that according to the last report from the GLAAS, global WASH funding has decreased from 10% to 5% of total humanitarian funding since 2000. What is more, this trend seems to concern both humanitarian action and development aid.

Investments in WASH are investments in public health—ODA to safe, sustainable WASH systems will contribute to achieving gains in health. Water and sanitation ODA disbursements (spending) increased from US$ 6.3 to US$ 7.4 billion from 2012 to 2015. However, aid commitments for water and sanitation have declined since 2012: global aid commitments decreased from US$ 10.4 to US$ 8.2 billion, and aid commitments to sub-Saharan Africa decreased from US$ 3.8 billion to US$ 1.7 billion from 2012 to 2015. Considering the greater needs to make progress towards universal access to safely managed WASH services under the SDG targets, the possibility of future reductions in aid disbursements does not align with global aspirations.

Source: Financing universal water, sanitation and hygiene under the sustainable development goals GLAAS 2017 Report, UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water

\(^{48}\) SOSH 2018 op. cit.
4.2.2. THE “QUALITY” OF MONEY

UNEARMARKED FUNDING AND FLEXIBILITY

There is great demand from both the large agencies and the smaller WASH NGOs who were interviewed for un-earmarked funding that allows flexible programming choices and risk management. Interviewees stated that emergency funding modalities are not always relevant to deliver strategic responses, particularly in protracted crisis contexts such as CAR and South Sudan. The reallocation of budget lines when the situation on the ground has changed remains difficult. Another significant problem is the short duration of contracts.

TIMELY AVAILABILITY

For agencies who do not have significant private funding, the fact that financial resources arrive slowly is often a key constraint for rapid deployment. Even if retroactivity of expenditure can often be negotiated with the donor, only agencies with their own resources, or who are able to raise funds very quickly, can intervene rapidly and without “red tape”. Although more and more agencies are trying to develop rapidly available financial reserves of this kind, only a limited number are able to mobilise sufficient resources to make a difference in the field. IFRC with its DREF, ICRC with its significant un-earmarked funds and MSF with its rapid mobilisation capacity, have a significant comparative advantage over the majority of agencies who have to write and submit proposals and wait for donor responses. Three key informants described the Cyclone Idai response (Mozambique, Zimbabwe, Malawi) when the majority of WASH agencies had to wait for external funding. All WASH agencies that can be relied upon to deliver a predictable response should have access to their own emergency funds, as is the case for other sectors.

49 South Sudan Crisis Response Plan 2014 (online) “Operations were delayed […], delays in bringing stock into the country as a result of funding shortages and customs delays”
PREDICTABILITY AND MULTI-YEAR FUNDING

Globally, funding flows over the past 5 years show a certain level of predictability though they involve cumbersome procedures and delays. However, many actors report that the lack of multi-year funding agreements or opportunities reduces the predictability of schedules and the sustainability of responses. Multi-year planning and appeals are critical to ensure that the preparedness and prevention measures necessary for a resilient WASH sector are put in place.

The humanitarian system does not have the necessary planning and appeals mechanisms to invest in long-term preparedness and prevention. Humanitarian appeals are typically made on an annual basis and most humanitarian funds cover a timeframe of less than one year. This short-term approach is detrimental to resilience efforts during protracted crises, as it leads to insufficient timeframes to either lessen the impacts of disasters or to strengthen the capacity for an effective humanitarian response should a disaster overwhelm prevention measures. According to OCHA, short-term appeals are being repeated over longer periods: the average humanitarian appeal lasted nine years in 2018 compared to five years in 2014. While reforms made at the World Humanitarian Summit in 2016 have been reflected in donor commitments in the Grand Bargain, the structure of the humanitarian system in most emergency responses is still not designed to support long-term investment in building resilient governments, service providers and communities.

4.3. HUMAN RESOURCES AND CAPACITIES

4.3.1. REQUIRED CAPACITIES

Though the information shared by agencies is far from complete (e.g. no budget information from MSF as WASH is embedded in Health budgets), the table above shows that some agencies, such as ICRC, have expanded staff in line with expanded budgets year after year. UNICEF’s staff budget ratio has decreased over time so appears not to match programme expansion, though UNICEF may have outsourced technical oversight in some cases. The case of Save the Children stands out with a massive WASH programme increase while WASH staffing has fallen far behind proportionally. This is a mixed and somewhat partial picture but does not look promising overall at the sector level. In addition, the increased demands being made of WASH actors are not related to technical issues but for those linked to the new requirements imposed on teams and agencies (in particular regarding accountability and reporting, as well as cross-cutting issues that have to be addressed simultaneously during WASH operations). Several key interviewees expressed concern that the size of administrative and support teams was increasing significantly faster than that of actual operational and technical teams. A more comprehensive response is expected from the sector by donors and other humanitarian stakeholders, impacting the capacity to focus on the specific core WASH response. Furthermore, more specialised work in urban areas has left the sector unable to respond predictably in these locations.

There are a number of systemic weaknesses and challenges that require investment and support in order to deliver humanitarian assistance in an increasing range of situations, such as work in urban environments, Faecal Sludge Management (FSM) and with vector-borne diseases. There is also some anecdotal evidence that knowledge of basic WASH programming is limited.

Some WASH activities have been well tested over the years (well digging, latrine setting, borehole drilling and rehabilitation, hygiene awareness components, etc.). Others have emerged more recently such as Community-led total sanitation (CLTS), urban WASH, cash transfer, etc. The ability to be proficient in all of these is a key determinant of an agency’s ability to respond in an ever more complex, insecure and urbanised world.
Capacity is theoretically distributed across the 3 IASC humanitarian types of agencies (UN, Red Cross/Crescent Movement, INGOs). However, there is only a handful of agencies that have the required scale, along with the culture and business systems to take on a strong role in WASH responses in light of increased demands and the further increases in demand that are likely to take place in the future. However, agencies that are very well positioned to fulfil this role need funds, business systems, all underpinned by a can-do institutional culture and a willingness translated into policies, structure, capacities and systems. Otherwise, their capacity to act will be severely hampered. Worryingly, a few agency staff at the global level voiced concern that their agency might be concentrating less on core WASH activities on the assumption that others will carry the emergency WASH burden. In future, unless agencies have sufficient staff competencies and business systems to implement all these different WASH activities, then they will be severely limited in some contexts.

4.3.2. RAPID SURGE AND CAPACITY TO SCALE UP WASH RESPONSES

From all interviews carried out during the study, this element, essential for the impact, is still not adequate despite efforts made by different agencies

During the interviews with the Key Informants, the following situations were discussed:

- A dramatic large-scale event takes place which overwhelms existing capacities in the country office.
- The event takes place in a country where there is no presence or network to facilitate contacts, visas, customs clearance, etc.

In both cases, there is a need to change the set-up, either by reorganizing existing teams or by accessing a surplus of manpower through a surge mechanism.

Several mechanisms have been developed over the years to allow fast and strong support to new operations. Some are managed by donors, such as DFID’s Chase OT, the Swedish MSB50, and the Dutch Surge System-DSS. Others are managed through NGOs (DRC, NRC, and RedR) or private actors, under their Social and Environmental responsibility. These mechanisms consist of rosters or lists of people with backgrounds in a variety of areas of expertise, including a strong WASH segment. The people who are registered have gone through a selection process, and participated in training organised by the roster managing agency. Experience shows that managing rosters is extremely expensive, so unless they are supported by donors, they might not be sustainable. Equally, it appears that the quality of the people seconded through either internal or external rosters varies drastically from one deployment to another, and therefore the predictability of the response is not always guaranteed.

Key Informants described the factors that can facilitate the inception or the scale up of an operation:

- Excellent logistics systems, like ICRC and MSF.
- Agile administrative procedures.
- Having a network of local agencies in place, who know the context and are technically capable.
- Having flexible start up cash available to hire a mixture of local contractors and partners.

In order to develop their own agility, several agencies have tested new mechanisms, such as the UNICEF Surge Capacity mechanism for WASH51.

50 https://www.msb.se/e
Surge capacity for coordination raises another set of questions. Since 2006 when the cluster system was established, WASH has had recourse to dedicated or “double hatted” cluster coordination capacity.

➢ CAST was formed in 2006 and consisted of 2, sometimes 3 core staff, who could be deployed.
➢ Additional capacity was available initially at regional level and then with global surge mechanisms. This is summarised below.

<table>
<thead>
<tr>
<th>Name of coordination surge mechanism</th>
<th>REWAs</th>
<th>RECAs</th>
<th>FST (1)</th>
<th>FST (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Regional emergency WASH advisors</td>
<td>Regional emergency (WASH) coordination advisors</td>
<td>Field support team</td>
<td></td>
</tr>
<tr>
<td>Donors</td>
<td>DFID/ECHO</td>
<td>ECHO</td>
<td>ECHO/OFDA</td>
<td>ECHO/OFDA</td>
</tr>
<tr>
<td>Hosting agency</td>
<td>UNICEF</td>
<td>CARE</td>
<td>IFRC</td>
<td>NCA</td>
</tr>
<tr>
<td>Number and types of positions</td>
<td>6 REWAs working on both UNICEF programme as well as coordination</td>
<td>6 RECAs dedicated to coordination</td>
<td>NA</td>
<td>1 x Senior Cluster Coordinator (preparedness and knowledge management) - 4 x Cluster Coordinator - 1 x Senior Information Management Officer - 4 x Information Management Officer - 1 Assessment Specialist</td>
</tr>
<tr>
<td>Notes</td>
<td>Time spent on coordination differed from region to region but was around 40-60% of time on average</td>
<td></td>
<td>IFRC had a team manager but in a non-deployable role</td>
<td></td>
</tr>
</tbody>
</table>

Existing roster for WASH coordination
4.3.3. Technical Capacities, Expertise and Staffing

Generally speaking, the Key Informant interviews and the case study analysis confirmed that it is difficult for the WASH sector to recruit people with both an engineering background (which allows them to develop context specific solutions in a complex emergency) and the soft skills required for hygiene promotion and for working in a humanitarian context. Some large organisations have the capacity to recruit sufficient staff to cover these two different specialities/job profiles, while many small or medium-sized organisations tend to ask people to be involved in the two areas. In some agencies, WASH staff are also in charge of logistics and are more WASH logisticians than real sector professionals. Due to new demands in areas such as social sciences, urban management and community accountability, running a WASH programme now involves more technical skills and responsibilities, as can be seen in the RedR WASH competency framework currently being developed. Agencies therefore need to invest in training to fill these gaps. Meanwhile, there is anecdotal evidence that the different demands made of WASH staff to be programme administrators, accountability experts, cross-cutting experts, etc., reduces their ability to do WASH well\(^{52}\).

There is a growing need for engineering sciences, hydrogeology and environmental competencies within the humanitarian sector. Two areas where there are specific needs are:

- **Boreholes**: The ability to analyse the aquifer in order to implement interventions which will not create cross-aquifer contamination. In various emergency contexts (e.g. Mozambique/Haiti), cases have been reported of humanitarian actors drilling boreholes (or outsourcing this activity to private companies), and not carrying out the necessary geological studies to ensure that there is no communication of water tables (in order to avoid the pollution of underground tables by surface water).

- **Latrines**: The technical capacity to analyse the geological characteristics of the soil in order to know soil stability and infiltration rates, and to avoid contamination of water sources is often missing (30 meters distance is not always enough - what is important is the location vis-a-vis the water source).

Numerous Key Informants reported that there is a lack of expertise in urban sanitation and in the designing of solutions that are in keeping with the local institutional framework (urban water and sanitation networks, municipal water boards, etc.). Across the board, humanitarian actors do not have sufficient technical capacity to carry out activities in an urban context outside of Hygiene Promotion, resulting in programmes with little focus on urban sanitation despite the fact that water contamination is the main source of cholera epidemics and other water-borne diseases (DRC, Yemen, Chad and CAR).

Recruiting senior WASH staff (including coordinators with leadership skills) in difficult contexts is problematic. For example, the key positions in INGOs in DRC, CAR and South Sudan are often occupied by staff without previous experience. This can create problems as their national counterparts are often older and more experienced than them. The problems are made worse if the staff do not receive sufficient technical support from senior staff. In addition, high turnover due to short contract lengths (often between 3 to 6 months) leads to both a “confidence gap” and a loss of project memory. In more and more countries (South Sudan, Chad, Rwanda, etc.), governments frequently ban INGOs from offering “entry level positions” to international staff, insisting that local staff should be given priority.

\(^{52}\) See South Sudan case study
The presence of humanitarian workers in the WASH sector for several decades in countries such as DRC has made it possible to train many national staff and this strong technical WASH capacity at the national level can be drawn upon. The downside to this is that some national staff are recruited by UN agencies offering much higher salaries, which reduces the ability of first line international and national organisations to run rapid, quality programmes. However, competencies vary a great deal between countries. In countries like Yemen, Syria or Iraq, where the level of education was high, there is a pool of highly capable staff, while in other countries, such as South Sudan or CAR, the national WASH capacity is much weaker.

### 4.3.4. Working with National Institutions

Notwithstanding the concern that in some cases governments may be party to conflicts, the importance of working with national counterparts (governmental institutions, local water boards, private services and local NGOs) is now widely recognised.

However, both the Key Informant interviews and the case studies show that WASH actors have great difficulty identifying active/defined counterparts within governments at central or local levels, while the ministries are often more active in other sectors (Health, Nutrition and Agriculture). In addition, in fragile economies and systems in crisis, civil servants are often not paid regularly and have very limited resources. As such, working with national institutions can be difficult, though it is of critical importance both in the short term and the long term. In Bangladesh, for example, the capacity of the DPHE at the district level is limited and is unable to lead the whole WASH intervention. The capacity of Government counterparts, in particular municipal and local Water Boards, is a key consideration for the ICRC in their operations. The sector does not systematically support these water institutions as part of their surge modality, though it is something that UNICEF and others consider on a case-by-case basis.

The capacity of national and local NGOs is often low due to weak national education systems, including in the engineering and social sciences sectors. There is often no specific in-country WASH training. In addition, there is a clear problem of ‘brain drain’ in some countries with local human resources being absorbed into international agencies who pay higher salaries than the state.

An additional source of pressure on the WASH sector is the insufficient investment by international actors in local capacity building. While there is very little time to do proper training in a rapid onset disaster context, it should be done more systematically in protracted crisis contexts. A certain number of promising initiatives have emerged in this regard in recent years such as the BIOFORCE training centres in Senegal and Burkina Faso, the development of training in CAR, the Masters for Water in Emergency in the Middle East and the ASEA-ASCEND initiative.

On the one hand, the Grand Bargain has outlined the direction that donors and agencies are expected to take. Given climate change and the restrictions on international mechanisms it seems pretty clear that more attention will be given to capacity building. But the core question remains the extent to which core IASC capacity should be maintained or even increased? Full localisation will remove global surge capacity, limiting capacity to that of national and regional mechanisms. There is concern within the sector that the localisation agenda will be taken too far too fast. The existing expertise, funding flexibility and business model provide certain IASC agencies with reach that it would take a decade of investment to build up in local actors. It is often only national governments and RC/RC agencies who have the critical mass to deploy beyond the IASC agencies, but that may be severely limited or compromised.
4.4. COMPLICATED AND COSTLY LOGISTICS: A KEY HINDRANCE

More so than in other sectors, WASH operations often involve the moving of equipment, teams and consumables into areas that lack infrastructure and where access is difficult. **As a result, the logistics involved can be complicated, risky and expensive.** The interviews and case studies underlined the difficulty of moving WASH equipment and valuable commodities by road in DRC, Mali, South Sudan, CAR and Yemen. Air transportation is sometimes possible but very expensive. Local markets can provide some of the items required, but only in limited quantities, and purchasing quality spare parts or equipment leads to an increase in prices, making it more difficult for local people to afford them. Importing the required goods is therefore the fall-back position, but delays in procurement, customs procedures and dispatch are often significant, paralysing field operations. In several cases, delays meant that equipment could not be delivered before the rainy season, leading to whole operations being postponed for months.

4.5. AID BUREAUCRACY

4.5.1. EFFICIENCY: MORE WITH LESS OR LESS WITH MORE

The humanitarian system has evolved from a three-layer delivery system (donor/agency/beneficiaries) to a much more complex system (donors/consortiums/single agencies/local agencies/beneficiaries or donor-CERF-cluster managed funds/NNGO consortiums or INGO-NNGO/private actors/beneficiaries). At each level, each agency has to set up its own system of financial management, monitoring and reporting.

According to the interviewees, this affects the quantity of money available for direct operations and thus the overall efficiency of the operations. In WASH, this means that the cost of a single latrine varies significantly depending on the agencies and their support costs. The added value of channelling the funds through a cascade of intermediaries induces relatively high management costs and some donors have reported that they are considering limiting the number of intermediaries.

The interviewees complained that another factor that reduces the efficiency of the sector is when processes are cumbersome and time-consuming. In DRC, many actors have observed a decrease in efficiency when UN agencies lead the coordination of the Rapid Response Mechanism. In CAR, however, this seems to be significantly more efficient. In some contexts, donors want to reduce their own transaction costs and to have economies of scale in overall ‘project management’. They thus tend to look for an ‘intermediary’, such as UNICEF. This works relatively well in contexts where WASH programmes are well structured. This was the case in Mali in 2013 and, to some extent, in post-earthquake Haiti where, in the early months of the response, UNICEF had the capacity to cover all water trucking operations in Port-au-Prince for several million USD.

Lastly, the efficiency of WASH programmes (and humanitarian programmes in general) is adversely affected by increased running costs. Some costs are the result of external issues, such as security management, while others are the result of system-wide issues, such as managing fraud, sexual exploitation, etc.
**4.5.2. VISAS, PERMITS AND OTHER GOVERNMENTAL RESTRICTIONS**

Several countries in Asia, the Middle East and Africa (Chad) have established limits on the entry of (new) agencies and/or international surge staff. A notable example is Indonesia following the 2018 earthquake/tsunami in Palu (Indonesia). Though not all governments impose restrictions, this is a worrying trend that began some years ago in Sudan and Rwanda. Of course, where agencies have an in-country presence this is less of a concern, but restrictions can be imposed on international surge staff.

Government restrictions can hinder WASH deployment when new humanitarian crises take place in fragile and turbulent countries (the Boko Haram crisis, South Sudan, Mali, CAR, etc.). In South Sudan, as humanitarian aid is seen as a potential source of revenue (the ‘new oil’), the Government has set increasingly high fees on many administrative transactions (e.g. work permits) and these administrative processes can be time-consuming. At the same time, this can help to reduce the mass arrival of agencies, which is sometimes referred to as the ‘humanitarian circus’.

**4.5.3. INTERNAL AID BUREAUCRACY AGILITY AND ADAPTIVITY**

In the humanitarian sector in general, agility seems to have been on the decrease due to agencies’ internal procedures and conditions imposed by donors. Moving away from operations described in the logical framework is discouraged by NGO managers out of fear of being faced with ‘non-eligible costs’, which might not be covered by the donor and will therefore have to be paid for directly by the NGO.

This means that adjusting to fast-moving contexts, which is often what is required in hard-to-reach and complex (and often dangerous) contexts is extremely challenging and only NGOs with sufficient means can afford to stray from the pre-agreed programme.

The recent move towards agile and adaptive management processes seems to offer much needed flexibility, but this has not yet been mainstreamed into all operational manuals.

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> In Yemen, bureaucratic control over visa procedures and the granting of travel permits remains a significant hindrance to the aid operations, as seen during the recent cholera outbreaks. When access to areas of concern is hampered by lengthy and often unsuccessful procedures to get travel authorisation, it is very difficult to develop proper outbreak management operations. For DRC, this is not necessarily the case. Despite the fact that it has become difficult to obtain visas, it is not the result of a conscious will to impede humanitarian action. This is not an issue in Mali and in many other countries in crisis. However, there are yet, extremely worrying signs are the signals that humanitarian aid in Chad where is entering in a difficult phase as the government has begun to put a lot of pressure on the aid actors (visa vetting, request for a percentage of aid budgets, etc.).

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53 “Adaptive management and programming: the humanitarian perspective” Alice Obrecht
ZERO TOLERANCE LEADING TO ZERO RISK?

Many Key Informants described their experience of significantly reduced risk-taking which considerably limits operations and effectiveness. One in particular described how zero tolerance for inadvertent terrorist support, fraud and sexual exploitation has the unintended consequence of zero risk-taking.

The current regime of zero tolerance (towards insecurity, terrorism and sexual exploitation) that is imposed on certain agencies is severely curtailing the response to at-risk populations, and considerably increasing agency support costs. The consequences and indirect costs of this regime are not being fully taken into account. In particular, it affects the direct delivery of humanitarian aid, but it also limits local partner and other delivery mechanisms too. If the current trend of ‘zero risk’ continues, it will mean that the direct delivery of humanitarian assistance will only be possible for the most determined and independent of agencies. The use of other aid delivery methods (e.g. cash or remote management) will just mean that risk will be transferred elsewhere.

It can be argued that zero tolerance is externally imposed while a zero-risk response is agency determined. These policies are having a disproportionate impact on the ability to deliver assistance to affected people.

Key Informants described how local actors in DRC, Mali, DRC and Yemen are able (and willing) to take the risk of going into difficult areas on behalf of international organisations. And yet, as suggested above, there continues to be insufficient investment in building local actors’ technical and organisational capacity.

4.6. COORDINATION

Many of the coordination challenges that affect the WASH sector are similar to those encountered in other sectors. However, the critical importance of WASH to the survival and wellbeing of affected people makes the quality of WASH coordination even more essential, both as a separate sector and as an essential component of health-centred multi-sector coordination. The key outcomes of such coordination are gap-filling, timeliness, coverage, disease control and improved quality of life in human settlements. As a result, it contributes to life saving and basic dignity.

The SOHS 2018 report underlines the complexity of the humanitarian aid system. There are many key players who are not fully integrated into the IASC cluster system and who sometimes play a significant role in country level coordination mechanisms: national coordination bodies, international and national civil protection agencies, national NGO networks, private actors and national and international military forces. In this multiple stakeholder system, the use of different and sometimes contradictory standards/methodologies/indicators is common.
4.6.1. DEFAULT COORDINATION MECHANISMS: WHAT IS THE IMPACT IF THEY DO NOT WORK?

The 6 functions of a cluster at the country level

1) To support service delivery
2) To inform the HC/HCT’s strategic decision-making
3) To plan and implement cluster strategies
4) To monitor and evaluate performance
5) To build national capacity in preparedness and contingency planning
6) To support robust advocacy

The Cluster reform introduced in 2005 and partly revised with the Transformative Agenda in 2011 has led to ‘modern coordination’ in humanitarian actions. However, the WASH Cluster continues to be faced with a number of challenges. This raises three main questions:

- Is coordination between WASH actors functioning and allowing information to be shared and collective planning to take place in order to fill gaps, limit duplication and look for interoperability between different operational modalities.
- Is multi-sector coordination functioning so that the impact of WASH is maximised in terms of health, nutrition, standard of living, education and protection?
- Is coordination between humanitarian action and development facilitating the preparation and the implementation of transitions?

Considering the three pillars of the IASC system, many INGOs involved in WASH sit either under the UNICEF-led cluster or the UNHCR-led refugee coordination model (except MSF and ICRC). It was regularly stated during the interviews and case studies that the cluster system or the UNHCR-led refugee coordination model do not do enough to transcend UN agency rivalries or competition between NGOs for visibility and funding, though individual agencies are as much responsible for this as the coordination systems themselves. To a great extent, these IASC mechanisms operate independently of development mechanisms, although new avenues are being explored in connection with the ‘humanitarian-development nexus’ and the ‘new way of working’ developed since the World Humanitarian Summit.

In various contexts, WASH cluster coordination is unable to carry out the 6 core functions of clusters and to take on the role of Provider of Last Resort. There are a number of reasons for this: significant HR gaps due to the difficulty of recruiting experienced staff for coordination, especially in difficult contexts; the reliance on short-term contracts for cluster coordinators, which does not allow sufficient time to build and sustain coordination mechanisms; dual responsibilities making the role of cluster coordinator very complicated; and insufficient training of co-lead agencies in the cluster coordination role. Put simply, we are asking too much of cluster coordinators.

During the Rohingya response, for a variety of political reasons, an ad hoc coordination mechanism was put in place, initially led by IOM rather than the 2 IASC sanctioned mechanisms. As a consequence, there was considerable disruption at the beginning of the response. The WASH sector was able to quickly establish a hybrid system that was well resourced and provided continuity of personnel. As noted in

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54 the Brussels meeting: Where now for the WASH sector’s response in emergency
the evaluation of the UNICEF response\textsuperscript{56} (p33), due to their significant budgets and capacities, UNICEF, IOM and UNHCR all carry similar funding weight and expectations in relation to WASH. This complicated WASH sector coordination created tensions between the organisations. The ad hoc nature of the mechanism caused delays in embedding the system, which, in turn, impacted the time available to allocate work, and agree standards and ways forward.

The involvement of national institutions in WASH cluster coordination is important but can be very sensitive when the government itself is part of the warring factions. The way this issue is to be handled should be thought through very carefully as part of the Standard Operating Procedure for coordination. In Mali, it works relatively well, but this is not always the case. It can become critical when the authorities are both the repository of a lot of information on WASH resources, and they are responsible for establishing norms and standards.

While the role of the Global WASH cluster is largely appreciated as a policy setting and advocacy forum, there are more nuanced views on the clusters at the national and sub-national levels (which is not specific to WASH). In several interviews in the field, clusters were seen as cumbersome & cluttered mechanisms that often failed to be sufficiently inclusive; they do not facilitate the smooth circulation of information and they dilute expertise. For several agencies, talking to everyone about everything comes at a cost and as a consequence critical issues, insights and key decisions can get lost along the way.

\textbf{4.6.2. Multi-sector Coordination}

In chapter 2 we underlined the fact that weak WASH activities can have significant negative impacts, which makes multi-sector coordination all the more important.

- Significant efforts have been made in Health and Nutrition at both the Global cluster level and in the field. The joint operational coordination between Health and WASH in Yemen, and the creation of Health-WASH-Nutrition working groups in many other countries, shows that this area of inter-cluster coordination is very dynamic. WASH programming to support the establishment and functioning of health institutions is central to the work of WASH teams in MSF and ICRC, as seen in the CAR and South Sudan case studies. WASH activities and public health works are the two main pillars of outbreak control and epidemic management as seen in Yemen and DRC. In Yemen and in other crises linked to epidemic outbreaks, the issue of WASH in health institutions does not always receive sufficient attention. In addition, WASH is often underused as a way to reduce the spreading of a disease, despite the fact that it should be seen as the cornerstone of disease control in many instances (in particular for deadly water-borne and vector-borne diseases). UNICEF’s causality tree of malnutrition underlines that water and sanitation problems have a significant bearing on health and therefore malnutrition\textsuperscript{57} although it is often difficult to demonstrate this in the field\textsuperscript{58}. The current thinking in UNICEF is that while there is limited evidence of the positive impact of WASH services on nutrition outcomes, observational data often finds a link between WASH factors and chronic malnutrition such as stunting, with a growing body of evidence supporting links with acute malnutrition.

\textsuperscript{56} https://www.unicef.org/evaldatabase/index_103442.html
\textsuperscript{57} Alderman, Harold, and Derek Headey, ‘The timing of growth faltering has important implications for observational analyses of the underlying determinants of nutrition outcomes’, PLOS ONE, vol. 13, no. 4, 25 April 2018, e0195904. Available at: <https://doi.org/10.1371/journal.pone.0195904
\textsuperscript{58} https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(18)30374-7/fulltext
Many Key Informants underlined how important it is to ensure that there is proper coordination between these two sectors and while significant efforts are being made (see CAR case study), it is clear that much more could be done. In the Rohingya camps in Bangladesh, there is no systematic health and nutrition data sharing and joint analysis, in part because of a non-alignment of geospatial catchment areas between the sectors. In theory, this is the responsibility of the inter-cluster coordination mechanisms but there is little evidence that this works sufficiently. In fact, it should be the responsibility of all WASH and Health actors to establish coordination and an interdisciplinary approach through joint programming and bilateral sector coordination.

In refugee and IDP camps in particular, there is a need to establish coordination with Shelter and CCCM as WASH should be involved in the camp layout design (the recently published new SPHERE guidelines point out the importance of involving WASH actors when designing a camp). Finally, service provision must be coordinated with site/settlement planning mechanisms. In order to manage prioritisation, it may be useful to introduce some conceptual prioritisation to help make the tough decisions that always need to be made during emergency responses. This could be based on strong epidemiological evidence to underline where the WASH sector can focus on service delivery, alongside public health. There is a move towards making environments ‘open defecation free’ (ODF) in many parts of the world, so in natural disaster situations the WASH sector is increasingly thinking in terms of programmes based on one house/one toilet, which requires close collaboration, and, when feasible, joint programming. This is also consistent with SDG 6 and can contribute to strengthening the humanitarian-development nexus and coherence.

The Protection sector and the WASH sector have been discussing protection issues for many years to ensure that WASH programming takes protection into account throughout the project cycle.

There is a need to coordinate closely with the Education sector because of the effectiveness of children as drivers of change in terms of hygiene behaviour (ref SLTS59) and also to encourage school attendance among adolescent girls through the provision of WASH services. In CAR, a great deal of effort is being made to develop inter-cluster strategic mechanisms, in particular between WASH and Health, WASH and Nutrition and WASH and CCCM.

One of the key factors that is frequently missing is proper information sharing between the Health and WASH sectors. As seen in the Yemen case study, and regularly mentioned by Key Informants, this increases the risk of water-borne disease outbreaks.

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59 https://www.communityledtotalsanitation.org/resource/guidelines-school-led-total-sanitation-slts
5. OPERATIONAL AND TECHNICAL ISSUES

5.1. WEAK STRATEGIC DEVELOPMENT CAPACITY

WASH strategy tends to be based on the sum of individual agency plans, rather than determining what should happen and then seeing which agencies can support this. The financial and technical capacity to produce baselines, carry out needs assessments and develop strategies in hard-to-reach areas needs to be further explored. The Global Wash Cluster is fully aware of this problem and is currently looking for ways to address it.

There also needs to be a mechanism for the predictable development of intermediate (2-4 yrs.) strategic master planning that sits within the wider camp/settlement/urban environment spatial planning process that includes all built environment aspects. The scale of the Rohingya camps in Bangladesh and the sheer number of actors meant that a number of strategic and technical studies were undertaken at the same time, but these were not always commissioned on behalf of the collective WASH sector and made available to it. The ability of the WASH sector to work collectively and to make the most of combined agency potential depends a great deal on work being commissioned on behalf of the collective and being shared.

5.2. QUALITY AND PROGRAMME MANAGEMENT

5.2.1. THE WASH SECTOR AND QUALITY CONTROL TOOLS

Achieving adequate quality programming remains elusive and harder to maintain with so many non-traditional actors on the scene. The Quality and Accountability Project (QAAP) and the Humanitarian Action Review (HAR) are mechanisms that are mobilised by the Global WASH Cluster Partners under the leadership of UNICEF respectively, following on from other quality initiatives that have been launched over the years. However, the sector is hindered by an ongoing debate about what quality is and how it can be defined given that each context is unique and that predefined approaches/standards are not appropriate. The ongoing tendency to establish detailed, fixed agreements in the midst of acute crises (rather than outline/in principle agreements) has a negative impact on quality. There is hope that the tools currently being developed (QAAP, HAR) will offer useful pathways to improve the quality of programmes.
5.2.2. THE STANDARD OPERATING PROCEDURES AND INTEROPERABILITY OF THE WASH SECTOR

There is an unresolved and ultimately time- and effort-consuming tension between adopting pre-agreed universal protocols, i.e. SOPs/standardised designs and the default tendency to reinvent interventions on the spot because of the implied uniqueness of each situation. However, this tendency unfortunately combines with the sector pattern of staff churn to result in delays to response, variations in quality, and the inability to consistently convey to national partners, contractors and others what is expected. In contexts where the sector is obliged to use other aid delivery methods, such as cash or contractors, the negative consequences of not having SOPs/standardised designs will be exacerbated. Working at arm’s length in this way requires greater clarity, direction and consistency so that the assistance that is delivered by other parties is nevertheless done in keeping with WASH sector standards. Since the 2010 Haiti earthquake, the WASH sector has repeatedly been unable to finalise technical issues rapidly. Standards exist, but are not respected by any of the stakeholders, including the national institutions. This creates an extended cycle of discussions during the most intense response phase, which causes delays, and leaves the door open to poor quality work because agreements have not been reached. One old hand referred to this as the “ground hog day” experience, which he has gone through in many places over the years. In DRC, problems with the appropriation of standards and SOPs by international agencies were explained in terms of the high turnover of international staff, resulting in delays and poor-quality infrastructure.

There is anecdotal evidence from some key interviewees to suggest that other sectors have stricter/more refined SOPs enabling them to be more certain about expected ways of doing work. Medical protocols or malnutrition treatment procedures are well established and disseminated. Several Key Informants suggested that the Health and Nutrition sectors could provide interesting approaches that WASH could explore (case definition, etc.).

5.2.3. MONITORING TOOLS: WORK IN PROGRESS

Though the humanitarian system has made some incremental progress in improving monitoring, the inherent challenges remain: parallel agency and donor systems, letting ‘perfect be the enemy of good’, insufficient collaboration with governments and longer-term SDGs monitoring. The SDG framework, with its aim to leave no-one behind, and include people affected by crisis, provides scope for humanitarian monitoring to be framed as a sub-set of the SDGs and so feed into the SDG process. The focus on quantity is a distraction that diverts our attention from quality and outcomes. While the HRP sometimes focus on outcomes, this often gets lost within 4W reporting which focuses on numbers. The question is therefore whether the WASH sector monitors the right/most relevant things. The 4Ws as a tool tends to drive monitoring to the lowest common denominator i.e. the activity level, without considering whether adequate quality has been achieved.

In Kachin and Shan states in Myanmar, only national actors have access to the population. As such, the challenge for the WASH sector is to support these actors at a distance and to bring added value. It can empower local actors by having clear, consistent and coherent standards and monitoring tools, so national actors can have the best chance of replicating these in a way that meets expected standards and funding conditions.

The experience of developing monitoring systems and the time taken before these are really embedded, as was the case in Myanmar, echo the experience of the many may WASH agencies in countless other situations, suggesting this is a systemic problem. The issue that seems to arise is that any pre-existing tools areget constantly renegotiated so that it takes a considerable amount of time and energy is used up at the height of the emergency, often invested just after the “paroxysmic” phase, with of a crisis before robust systems only being put in place.
WASH monitoring, like in other sectors, is often unable to capture quality adequately. The cluster now regularly uses REACH as a third-party monitoring system to provide more real-time data of a quantitative nature. The challenge remains for the cluster sector to monitor quality and to have the means to highlight inadequate quality.

5.3. TECHNICAL ISSUES

5.3.1. THE CHALLENGES IN URBAN ENVIRONMENTS

There are increased efforts to do things differently and continued recognition that work in urban areas is complex, with the majority of respondents saying that it requires different approaches and skills. The skills that are required are not part of the classic ‘WASH skill set’, involving areas such as electro mechanics, pipe network design, and urban management. Work by ALNAP, Groupe URD, RedR, the UNICEF urban WASH study, and EAWAG show that the need for capacity building and learning is recognised for all sectors, and WASH in urban environments is an area where there is much still to be done. ICRC has been undertaking consistent quality urban work for decades. UNICEF and UNHCR have recently been developing an urban strategy, while the much smaller scale work of UN Habitat is, of course, rooted in the urban environment. Oxfam has undertaken quite a lot of urban work over the decades, and other agencies have engaged in ad hoc activities here and there. Markets and the role of the private sector consultancies are obvious means/opportunities but are not greatly used. Several NGOs are looking into options of this kind.

Competencies in urban sanitation are generally low among WASH actors. This is confirmed by the DRC case study as there are no urban sanitation projects in Bukavu nor Goma, despite the prevalence of cholera and other water-borne diseases. EAWAG also confirms that they are in high demand to support both smaller and larger agencies in urban and peri-urban faecal sludge management (FSM). MSF France recognise they do not always feel capable to tackle urban/peri-urban WASH. However, this is changing due to the Syrian Refugee crisis where certain competencies are being developed (e.g. the clusters are beginning to provide training in urban sanitation).

5.3.2. WASH, GENDER AND OTHER VULNERABILITIES

Ensuring that WASH services are available to all, even in difficult contexts, is often a formidable task. In large-scale emergencies, such as the Rohingya crisis, when all sectors have to step up to provide services to a huge new caseload, the situation for females, the elderly, and disadvantaged people can remain unsatisfactory for a long time (see Bangladesh refugee case study and the evaluation of gender etc. in the Rohingya response). The challenges of providing latrine facilities that worked for adolescent girls and women in particular were highlighted during the evaluation of the UNICEF response undertaken in April 2018. When the capacity to intervene is drastically limited (as in Syria and Iraq at the height of the conflicts), unfortunately many people are often ‘left behind’.

5.3.3. Usability of Cash/Voucher Approaches to Replace WASH

In the last couple of years, the GWC has engaged more actively with demand for more CASH/voucher programming. The GWC ‘Cash and Market’ Technical Working Group has looked into generic CASH modalities that draw heavily from the Food Security sector to understand how this can work. Though access to food may be considered to be a human right, it is the object of trade. WASH, on the other hand, is not traded in the same way, and some say that it should not be. There has been an inherent assumption made by the proponents of cash programming that it is highly adaptable and transferable to all sectors, but there has not yet been enough work done to overturn the systematic cash programming bias promoted by some. The WASH and Shelter sectors recently convened their own meeting to understand more about the applicability and limits of cash, rather than be led by the CALP. The Nutrition sector is also still investigating the extent to which cash can be applied to its programmes and does not yet have an official position. Cash programming seems to be more adaptable to the purchase of hygiene kits and latrine construction than to water provision. However, in some areas, it can boost private local water provision, although water quality is more difficult to control. Other aspects of WASH are more complex, so the sector may wish to give greater guidance to donors and others about the opportunities and limits of cash programming, rather than wait to have something imposed by others. Efforts have been made in this regard, such as the Global WASH Cluster position paper on Cash.

It was recently stated at the last Grand Bargain Cash Workstream Annual Workshop in Rome that there are no WASH outcome indicators that should be systematically included in Multi-Purpose Cash (MPC) grants. The inclusion of WASH outcomes in a project including/utilizing an MPC modality is conditional upon:

- the implementation of a market analysis prior to the project design showing that critical WASH market systems can respond adequately to an increased demand for WASH services and commodities;
- the inclusion of WASH related costs in the MPC transfer value, based on the relevant Minimum Expenditure Basket (MEB) or other means of calculation;
- the implementation of further types of interventions and modalities alongside the MPC, as recommended during the response analysis and design phase to meet sector outcomes. The Global WASH Cluster recommends using MPC with a mix of other approaches, such as local WASH market support, community engagement, capacity building, behaviour change, direct service delivery, vouchers, and labelled or conditional cash transfer where relevant;
- the participation of relevant WASH technical human resources to support the management / coordination of all phases of the project (level of assessment, response analysis, design, implementation and monitoring).
5.4. ADVOCACY - NOT SUFFICIENTLY EFFECTIVE

The potential impact of the WASH sector is not measured/evidenced or as effectively communicated as it should be. This limits the sector’s ability to advocate on key crises and global issues and acquire additional resources. During the study, doubts were raised about how well some cluster leads and co-cluster leads understand or implement the key advocacy function of the WASH cluster. A critical aspect is the development of gap analysis early on in the response to guide advocacy. Its takes too long to convert 4Ws data into a clear capacity and gap analysis for the whole sector. A number of Key Informants stated that they thought the WASH sector was poor at communicating its messages (at the global level, but also in the field). The time is right for WASH to represent/reinvent itself and to ‘rattle the cage’, as the Education sector has done. This point is already understood at UNICEF.

Water system in Zataari refugee camps, Jordan
6. CONCLUSIONS

6.1. AT THE OPERATIONAL LEVEL

6.1.1. THE NEED FOR A TOOLBOX APPROACH

A toolbox approach to the full range of aid delivery methods (cash/voucher, private sector programme delivery mechanisms) is challenging more conventional direct and even local partner delivery mechanisms. It is, however, necessary. Currently, each method is looked at in isolation at the policy level, based on policy aspirations, but without an understanding of its relative appropriateness and how it can be optimally articulated with other methods to deliver durable humanitarian solutions. Furthermore, the rapidly changing world means that some methods can be less feasible whilst others become the only realistic option, depending on the context. What is more, in order to be able to use all these methods, agencies need to have a far broader range of skills and greater experience than most WASH staff have.

6.2. AT THE STRATEGIC LEVEL

6.2.1. SURVIVAL WASH: A FUNDAMENTAL ELEMENT OF CRISIS MANAGEMENT

People can survive a few weeks without food, a few weeks without shelter, several years without education, but without water, they will only survive for a few days. This is the basis for the concept of “survival WASH”. Of all the needs that crisis-affected people may have, access to water is an absolute priority. As such, protection is an overarching, cross-cutting principle.

Though there is recognition of the core contribution of the WASH sector, it is still not given enough strategic support. Its contribution to public health is essential, as underlined by epidemiological evidence. It is always vital to the functioning of human settlements in crisis zones, such as refugee camps, IDP settlements in urban and rural contexts, destroyed cities or remote areas where people are blocked and cannot escape. WASH is also essential to health institutions and the education sector, and increases dignity and quality of life, particularly for women as illustrated in the diagram below. This means that the capacity of the WASH sector to rapidly deliver quality WASH interventions in a predictable manner and to scale up its response - even in difficult environments - is essential for the survival and dignity of crisis-affected populations. And yet, too often, it remains a secondary priority.
6.3. **IS THE WASH SECTOR FIT FOR PURPOSE GIVEN CURRENT AND FUTURE CHALLENGES?**

The study provides a number of answers to the big questions raised in the introduction.

**In view of the seriousness of the situation in many crises, does the WASH sector have the capacity to respond to existing needs?**

Due to limited coverage (often “too little, too late”), and difficulties in delivering quality services, the WASH sector is struggling to respond properly and efficiently to needs, despite some progress due to the efforts of key actors. Sustained efforts will continue to be required from all stakeholders.

**Is the WASH sector in a position to respond simultaneously to multiple crises?**

In recent years, the WASH sector has had to respond to several crises in parallel. This was done as well as the people and institutions involved were able to do, but sometimes there was a lack of quality and staff wellbeing suffered. The WASH sector currently does not have the resources to cope with multiple level 2 or 3 disasters taking place at the same time in different parts of the world, and lasting a relatively long time.

**Is the WASH sector fit for purpose in relation to coming challenges?**

As a result of population growth and rapid urbanisation, wash systems in both rural and urban environments are finding it more and more difficult to deliver services. With the increasingly visible effects of climate change, including extreme weather events and droughts all over the world, there is increasing competition for water resources. Despite the impressive commitment of the WASH sector at all levels, it is not yet fit for purpose to face coming challenges.
## 7. RECOMMENDATIONS

The following recommendations aim to help the WASH sector to explore the way forward in more depth and suggest areas where donors, humanitarian agencies and WASH staff can collectively improve the current performance of the sector and its capacity to respond to new and complex challenges on a large scale.

### 7.1. SURVIVAL WASH

The increasingly high expectations that the aid system should be able to simultaneously address multiple issues, such as the humanitarian-development nexus, coordinating with all sectors and addressing many different types of vulnerability, is making it harder for the WASH sector (and other survival sectors) to retain their survival focus when the situation dictates. In an environment where every concern and all human rights are hotly contested, there are no objective and agreed ways to moderate this predictably. The WASH sector needs to focus on its core survival/public health mandate when there is clear epidemiological evidence that this is required and programme more closely/jointly with the Health/Nutrition sectors in outbreak (ref GTFCC) or outbreak prevention mode to achieve this. However, in other humanitarian situations, where acute public health risks are lower, it needs to prioritise working with a wider range of sectors in a service delivery/facilitation mode, such as with the Shelter/ Settlements sectors to enable recovery/ returns, and supporting education, dignity and improving protection and quality of life, particularly for women.

### Recommendations:

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<tr>
<td><strong>N°1</strong> Redefine and implement WASH as a public health priority</td>
<td>Redefine WASH prioritisation based on knowledge of epidemiological risks and patterns and, where available, on real-time data. Three types of response are possible: i) an outbreak focus, ii) a public health focus, or iii) a service enabling focus. The Health and Nutrition sectors will be at the heart of outbreak and public health responses. Regular and timely data exchange protocols are required at the global and national levels between the WASH, Health and Nutrition sectors.</td>
<td>All agencies IASC inter-cluster Donors</td>
<td>ASAP</td>
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<td><strong>N°2:</strong> Advocate/communicate at the global and national levels in favour of the concept of ‘survival WASH’</td>
<td>Evidence-based advocacy should take place within the humanitarian system and more widely. Other WASH benefits such as protection, dignity, quality of life, education, and livelihoods (agriculture and pastoralism) should also be measured and communicated.</td>
<td>All agencies IASC inter-cluster Donors</td>
<td>Start with pilot and then expand</td>
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7.2. RISK MANAGEMENT

The WASH sector requires a significant and dispersed presence on the ground and so is particularly exposed to insecurity and fraud. By restricting/limiting programmes to mitigate the risk of incidents, humanitarian organisations reduce access to WASH services. Many WASH sector Directors and some Emergency Directors feel that there is overzealous risk management (in relation to risks of insecurity, fraud, etc...) thus reducing the ability to respond effectively in the most challenging environments. This impacts the survival sectors more than others. In insecure areas, there is an ethical dilemma between staff safety and the risks faced by those affected by crisis. This can inadvertently lead to greater agency inaction and the transfer of risk to those most in need.

Recommendations:

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<td>N°3 Revise risk management strategies in order to create an enabling environment for working in difficult contexts</td>
<td>Large and medium-sized agencies that have the commitment, scale and reach to work in the most demanding environments should review their risk management policies to ensure that the risks to staff are balanced against the risks to the population. Given the importance of local partners, risks and responsibilities should be shared between partners and funding organisations. Agencies working in these environments should work with donors, the media and others to mitigate the effects of a public backlash due to negotiations with specific belligerents or if any security incidents take place</td>
<td>All agencies</td>
<td>ASAP with some pilots</td>
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7.3. DONOR FUNDING

WASH is not the only sector where international funding is insufficient in relation to appeals, but the percentage going to the WASH sector has been falling in the last 5 years, despite rising needs. In many crises, significant numbers of people (millions of people) do not have adequate WASH services, and this has repercussions on other sectors. It is essential to increase the financial capacity of the sector to ensure that it is predictable, responsive and agile.
Recommendations:

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<td><strong>N°4</strong> Establish donor leadership to promote the prominence of WASH alongside other survival sectors</td>
<td>With the support of the GWC Donor Consultative Group, donors should convene a high-level working group, with a donor champion for WASH, to establish the equal importance of WASH alongside other survival sectors. More specifically, donors should find a way to reduce the gap in funding between the different survival sectors, rather than continue to allow WASH (and shelter) to consistently lag behind. Donors should work with the SDG 6 leadership and key UN assembly members to ensure that both national and international bodies give priority to WASH, particularly for long-term/chronic crises.</td>
<td>Donors, UNICEF, GWC</td>
<td>ASAP</td>
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<td><strong>N°5</strong> Enhance proactive availability with multiyear funding and agile use of financial resources with flexible procedures</td>
<td>Strengthen and accelerate ongoing reforms in line with the recommendations of the Good Humanitarian Donorship Initiative (GHDI) and with the findings of many evaluations, to ensure rapid and flexible funding systems are used by donors to support the immediate response.</td>
<td>Donors, OECD, Development banks (WB, etc.)</td>
<td>ASAP</td>
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<td><strong>N°6</strong> Ensure that agencies have access rapidly to resources that allow them to engage rapidly in the WASH response</td>
<td>This could be done by having each agency creating its own reserve and by supporting existing mechanisms that can make money available rapidly to prequalified organisations who have demonstrated their capacity to operate very quickly in difficult contexts.</td>
<td>Agencies, donors, Cluster lead (UNICEF), OCHA, Development Banks</td>
<td>Can start immediately</td>
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7.4. HUMAN RESOURCES

WASH staffing levels have significantly lagged behind increases in programme spending over the last 7-8 years. Agencies such as UNICEF and ICRC have kept pace with programme expansion, while others have not grown or not grown fast enough to meet their expanded programming. Moreover, this relative reduction in capacity has taken place at a time when demands upon all staff to programme more comprehensively are increasing. External surge mechanisms do exist but cannot cope with the growing demand. The following recommendations aim to ensure that there are predictable human resources so that the WASH sector is able to deal with increased and changing needs.
### Recommendations:

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<tr>
<td><strong>N°7</strong> Further develop technical capacities and the capacity to deal with new challenges</td>
<td>Expand the range of key WASH staff able to manage the full range of aid delivery methods for WASH programming. Expand the range of specialists and/or WASH staff who can respond to new technical challenges among which faecal sludge management, work in urban areas, solid waste management, emerging global environmental disease threats, and risks of highly toxic pollution resulting from disasters or conflicts in industrial settings. This will mean revising standards, which can be done at the agency level and more globally, for the sector at large, by linking with the research sector.</td>
<td>All agencies UNICEF Scientific community Governments, Civil society, Private sector in country</td>
<td>Medium term</td>
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<td><strong>N°8</strong> Strengthen core WASH capacity for rapid and sustained deployment</td>
<td>In order to maintain and bolster the global capacity to surge and sustain responses, agencies have to redevelop their internal and predictable surge capacity. Across the key agencies that face a shortfall in the staff to programme ratio, expand the number of senior and mid-level WASH staff to meet the needs for both acute and chronic programming, including both health promoters and engineers. (This is a proposed system-level outcome but each agency needs to find their own ways to ensure they have HR policies with fast-track recruitment mechanisms, training strategies for career pathways and strategies to retain surge staff and staff able to work in difficult roles and countries.) This could involve innovative partnerships with national institutions and the private sector to develop or create more surge mechanisms.</td>
<td>All agencies Donors</td>
<td>ASAP</td>
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7.5. PREPAREDNESS OF THE WASH SECTOR

Coordination and programme capacity within key IASC agencies to surge and sustain responses in the most challenging situations is still required to complement national capacity development and deployment. Yet this has clearly been insufficient in some of the most difficult environments looked at. WASH needs to expand its global capacity to surge and sustain responses as it is not keeping up with increased funding, let alone demands. There are only a handful of large agencies and some medium-sized agencies that have the required capacity, organisational culture and business systems to constitute the necessary core capacity. However, it is important that the agencies that are currently well positioned to fulfil this role have a ‘no regrets’ policy and do not assume that others will carry this burden.

**Recommendations:**

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<tr>
<td>N°9 Maintain/expand core global and local capacities to surge and sustain response across a number of key WASH agencies as the backbone of a predictable global WASH response</td>
<td>Draw this capacity from the larger and medium-sized WASH agencies across all 3 IASC humanitarian pillars (i.e. UN, Red Cross/Crescent Movement, INGOs) for the coming 5 years+. This must be supported by expanding dedicated financial reserves with the capacity to mobilise more internal funding before donors provide emergency funding.</td>
<td>All agencies with a strong commitment to WASH</td>
<td>ASAP</td>
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<td>N°10 Preparedness requires further strengthening because it is inconsistently implemented</td>
<td>There are clearly some systemic blockages, including limited anticipation capacity, low priority given to preparedness when the focus is mainly on response, and cumbersome recruitment and procurement procedures.</td>
<td>Agencies; UNISDR Donors</td>
<td>Should start ASAP</td>
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<td>N°11 Reinforce the capacity of the GWC to reliably and predictably strengthen leadership, decision making, strategic planning and support services in challenging contexts.</td>
<td>Further develop the capacity of coordination mechanisms to rapidly support operations in difficult environments. Invest in establishing the capacity to rapidly deploy coordination staff, tested for the quality of their leadership, in order to facilitate collective direction setting, enhanced sectoral fund raising and the capacity to plan holistically to support multi-disciplinary interventions</td>
<td>GWC Agencies Donors UNDAC</td>
<td>Medium term</td>
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</table>
7.6. PROTRACTED CRISIS AND THE HUMANITARIAN-DEVELOPMENT NEXUS

Today, crises tend to last longer and post-conflict situations are always uncertain. The fact that these situations affect large numbers of people living in high-risk environments for extended periods of time puts all sectors, including WASH, under pressure. The capacity to surge, remain engaged and deliver in these difficult situations is often very challenging. In addition, WASH infrastructure that is put in place often rapidly becomes idle. When the population starts to recover or the situation stabilises, there is a recognised gap between emergency and development (the nexus) across all sectors. The ability of the WASH sector to bridge the gap between relief and development is severely limited. This is further hampered by the different humanitarian coordination modalities led by different UN agencies, rivalries and the constant churn of staff between key agencies. The WASH sector needs to have a more holistic / integrated approach.

Current, the WASH response in emergency situations is ‘led’ by different organisations: UNICEF for water/public health, FAO for water and irrigation, and livelihood; UNESCO/UNEP in certain contexts for knowledge underground water. This undermines the possibility of developing integrated strategies. Greater efforts need to be made to ensure that WASH actors evaluate their impact on the environment and implement corrective measures.

Recommendations:

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>How to</th>
<th>Target</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>N°12 There is a need to build bridges between acute humanitarian situations, protracted contexts and development.</td>
<td>Though linking relief, rehabilitation and development has long been an issue among aid actors and despite the New Way of Working being discussed in the UN System, there is still a need to develop intermediate master plans (2-4 years) at the sector level in order to coordinate with other sectors and strengthen the humanitarian-development nexus. This is likely to be based upon internationally-recognised high-level consultants in order to transcend the limitations of UN agency mandates, and have enough clout to be acceptable to national governments and development banks.</td>
<td>All actors</td>
<td>Short to medium term</td>
</tr>
<tr>
<td>N°13 Core WASH agencies work with greater determination to strengthen WASH coherence and effectiveness</td>
<td>This could be done through a kind of Global Compact to determine and adopt pre-agreed universal protocols/ approaches /SOPs, that would help not only to respond better in the acute phase of the crisis, but also adapt as it evolves and towards the post-crisis situation</td>
<td>All agencies with a strong commitment to WASH</td>
<td>Should start soon</td>
</tr>
<tr>
<td>N°14 There is a need to build bridges between the different actors involved in water management</td>
<td>The WASH response should include water for irrigation / animals. In addition, WASH actors need to ensure environmental impact assessments are carried out in a more systematic way to minimise the impact of their interventions on the environment.</td>
<td></td>
<td></td>
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</tbody>
</table>
7.7. GLOBAL WASH LEADERSHIP - LOOKING BEYOND THE HORIZON

The ability of the Global WASH sector to direct and adapt WASH programme policy at the country level based upon good practice remains limited. Programme delivery mechanisms are diversifying more into cash/ use of contractors/ working with municipal authorities and the private sector, beyond the traditional mechanisms of direct service delivery or working through local partners which were more dominant 10 years ago. This requires a broader skill set and agency capacity. Global initiatives related to peer review, standards and quality, conducted under the lead of the WASH Cluster, may be making incremental progress but are not transformational. The global WASH sector should seek management and donor support to direct and adapt WASH programmes more assertively.

**Recommendations:**

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>How to</th>
<th>Target</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>N°15</strong> WASH agencies need to equip themselves to deal with upcoming challenges and work in new areas with a complete range of aid delivery methods to respond to an ever-changing, complex and urbanised world</td>
<td>As water scarcity becomes a growing threat to security and increasingly high levels of pollution, including toxic waste, a constant threat to basic survival, there is a need to expand agency capacity to undertake the full range of WASH response methods to deliver high quality WASH programmes. This will also mean that the sector as a whole will need to explore many new areas and will need to work in close collaboration with research bodies.</td>
<td>All actors bring in scientists and specialists of collapsology (study of the collapse of industrial civilization and what could follow it)</td>
<td>Medium term</td>
</tr>
</tbody>
</table>

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61 https://www.academia.edu/Documents/in/collapsology
ANNEXES
1) BACKGROUND AND CONTEXT

The Global WASH Cluster (GWC) was formed in 2006, building upon the successes of an existing Water, Sanitation and Hygiene (WASH) humanitarian sector working group. The GWC is an open and formal platform for humanitarian WASH actors to work together in partnership. The forum now consists of 72 members, comprising International Organizations, United Nations agencies and International Non-Governmental Organizations. Civil Contingency/response agencies, academic institutes and donors also play an active role. The primary purpose of the cluster is the delivery of water, sanitation and hygiene promotion assistance to affected populations during emergencies through improved coordination of the response at all levels:

- At global level, the aim of the cluster approach is to strengthen system-wide preparedness and technical capacity to respond to humanitarian emergencies by ensuring that there is predictable leadership and accountability in the WASH sector.
- At country level the aim is to strengthen humanitarian response by demanding high standards of predictability, accountability and partnership. It is about achieving more strategic responses and improved prioritization of available resources through better defining roles and responsibilities of humanitarian organizations and providing the Humanitarian Coordinator with both a first point of call and a provider of last resort in each sector/area of activity.

In July 2014, MSF published "where is everyone", a series of three case studies of emergencies, specifically related to conflict and displacement (South Sudan/DRC/Jordan). This report highlighted the following gaps in the sector:

- Countries with considerable security and logistical challenges, persistent problems remain with the scale up of the UN and INGO response, which is characterized by bureaucracy and risk aversion. What assistance there is in these contexts is largely concentrated on the capital cities and/or in a small number of very large, officially recognized refugee camps; very little reaches the periphery.
- This report criticized the UN for its lack of flexibility and effectiveness. In particular, it highlighted the way the current UN system inhibits good decision-making, in particular in displacement crises where a number of UN agencies have a responsibility to respond.
- The choices made by INGOs, were put in the spotlight: to profile themselves as emergency responders, but without building the technical and human capacity to respond quickly and effectively; to work as implementers for the UN agencies, and become trapped in their bureaucracies; to avoid risk to the extent that they won’t work where people most need them; and to become dependent on the geopolitical interests in play in various conflicts and crises.
- Donors should also examine their contribution to the atrophy of the humanitarian system, in particular their funding systems which are slow, inflexible and not suited to emergency situations. The “value for money” of a late, badly targeted and ineffective response is surely close to zero.

Worth mentioning the research of the SAVE consortium, which reaches similar conclusions, and OCHA NRC Presence and Proximity, both support the general MSF argument about coverage.

Recent emergencies demonstrated that the issues remain the same, Yemen humanitarian crisis is one example: it has been and remains a major and complex humanitarian crisis, mixing war, a variety of non-state actors and an unprecedented outbreak of cholera. In July 2017 there were 300,000 suspected cholera/AWD cases, with over 1,000 casualties and cases were still increasing. The worst-case scenario of 340,000 cholera/AWD cases by December 2017 is about to be reached and figures in the preparedness plan were revised to 500,000 potential cases. Yet, international organisations have not scaled up to an adequate level and local NGOs are still playing a major role of implementing cholera response plan despite limited capacity. Capacity of the sector was also raised as an issue in Somalia, CAR, Nigeria, and recently in DRC (Kasai) to name few. In June 2017, MSF published a new report, as part of the MSF OCBA Emergency Gap project62, analyzing "the evolution of emergency WASH in humanitarian action”. The overall purpose of the study was to conduct a retrospective analysis of how emergency WASH programming has evolved in the broader humanitarian system generally, so as to better understand the current emergency WASH challenges in the humanitarian sector. Below are some extracts from this report which has similar conclusions/remarks than the report published by MSF 3 years ago. “An emergency WASH gap exists – there is little disagreement on this point within the humanitarian sector. There is a paucity of emergency WASH capacity, but a surplus of complacency”.

\[62\] aims to unpack the drivers of the loss of emergency response capacity in the traditional humanitarian system, by analysing the enablers and obstacles to revision of effective assistance in the acute phase of conflicts.
• Organisations should not work in silos – this will solidify the problem. Tensions remain between emergency and development-focused strategies and perspectives. More actors need to be encouraged and supported to work in the emergency phase, and emergency actors must be more open to handing over sustainable programmes. This point reflects the on-going discussion at the global level around development–humanitarian nexus.

• Technical capacity needs boosting. This relates to human resources, research and support functions – within organisations and between peers. Urban WASH needs, as well as the link between WASH programming and health outcomes, deserve special research attention. Emergencies specifically in middle East have highlighted a major gap in knowhow and implementation in urban context.

• Throughout the period covered in this review, adequate scientific operational research has also been lacking concerning linkages between WASH programming and health outcomes. It was a common reflection that a proper evidence base is lacking when considering the impact of WASH programming on human health. There is also a lack of integrated response between Health/Nutrition/WASH which is some circumstance undermine the efficiency of response

• Coordination mechanisms fail, though, when there are few actors willing or able to provide adequate levels of resources or have the will to intervene in the first few months of a crisis, a view held by all respondents. Coordination should also be led by people with sufficient experience. Coordination can too easily become a forum for resource distribution rather than priority setting.

• “There remains insufficient confidence and evidence of what works, what doesn’t and why in emerging processes, technologies and approaches for humanitarian WASH services. Unknowns persist about which strategies are suitable for the immediate emergency phase and which technologies, practices, and approaches may permit a transition towards more sustainable solutions and future resilience.”63

• In many contexts, it should be noted, even the minimum standards are not met and it should not be assumed that the presence of standards equates to adequate humanitarian assistance in emergency situations. A focus on quantity can also mask inadequacies in quality.

• Perception that humanitarian emergencies have become so complex that traditional types of humanitarian interventions are no longer feasible. Some actors wonder if they are capable of intervening in such complex political environments.

• A development approach has progressively taken over WASH activities: 1) increase programmes in a participatory approach rather than the direct payment of labour by organisations, and through local partners. This last point is also one of the outcome of recent WHS about localization of aid.

• Whilst there is some practical recognition of the importance of WASH response in humanitarian contexts, its profile when it comes to funding levels is low. Using data from FTS since 2009, the WASH cluster saw that it received less than 4 percent of all reported funding and appeals are largely funded around 40 percent. Other life-saving sectors are faring better in terms of funding, as a percentage of all funding, Health has increased its share since the introduction of the cluster approach to an average of more than 12 percent in the last seven years (2009-2016) and Food remains the highest individual sector with an average of more than 30 percent.64 What the consequence of underfunded WASH sector for the health and nutrition sector and people affected by disaster?

• Other sectors have increased their profile through high-level campaigns such as ‘Education Cannot Wait’ and ‘Scaling up Nutrition’. Often donors will ask for evidence of impact in humanitarian and natural disasters, but WASH data is rarely monitored consistently enough to enable the sector to advocate strongly. Data and evidence are the backbone to supporting any advocacy campaign and currently the humanitarian WASH sector is not in a strong position.

One of the main conclusions of this report is that “there are not fewer WASH actors, but they are less able to intervene in emergencies. There are, in fact, many organisations in the humanitarian sector with the capacity to implement WASH activities. The question is whether this capacity can be utilised in complex humanitarian emergencies, especially in insecure contexts. There was a clear consensus by all respondents that the answer is negative – fewer organisations are willing or able to respond in the first three months of an emergency.”

Finally, a lack of technical capacity also pervades the sector. Even with the will to intervene and the funding, if an organization does not have the technical competency to implement quality programming, then the results will not be to the benefit of the populations.

The Grand Bargain presents an opportunity for increased efficiency and better ways of working for the sector. At the same time, projections of humanitarian needs continue to outstrip resources. The informal meeting on the capacity of the sector organized October by GWC/ WASH interagency aimed to put together some of the recent thinking on the sector and to bring together both water and sanitation specialists as well as some senior Operational / Programmes staff to provide some strategic reflections which will help the sector face the challenges ahead. There was an acknowledged gap in the ability of the WASH sector to respond and implement emergency

64 GWC Partnerships Report Final version, 2017, Jean McCluskey
WASH programming especially in the acute phase of an emergency and increasingly so in restricted environments. Below are some of the recommendations of this meeting:

1. Design better models for WASH programmes in protracted crises in closed settings and also in ‘non-camp’ contexts and share lessons and learnings from different approaches tried
2. Invest more time on the ground - do not give up! The relevance and manner of work can provide security in some contexts
3. Invest resources to advocate for WASH interventions to be integrated within other sectors (e.g. health, nutrition/food, protection) and to “tell the WASH story”
4. Introduce conditional funding for the WASH sector for funding to be released only if programmes meet quality standards
5. Invest resources to conduct operational research and strengthen the evidence base for WASH interventions used in humanitarian contexts.
6. Increase the number of - and training of good leaders/managers/field coordinators who are able to manage a team of specialist staff
7. Connect the WASH agenda to other sectors at all levels of the humanitarian system (e.g. health, nutrition/food, shelter, protection - see full report for examples)
8. Invest resources to fix bad quality work and ensure the continuity of services noting that the quantity of services provided across the whole sector has masked inadequacies in quality for over 40 years.

Over the past years, there have been a number of further reviews of the WASH sector, identifying gaps and looking at challenges for the sector. The Grand Bargain also presents an opportunity for increased efficiency and better ways of working for the sector. At the same time, projections of humanitarian needs continue to outstrip resources.

2) PURPOSE AND OBJECTIVES

Partners involved in the Humanitarian WASH response have seen a significant decrease in the capacity of the humanitarian WASH sector to prepare and respond with sufficient quality and coverage, based on anecdotal evidence over the last 5-10 years.

Despite efforts, especially by the Global WASH Cluster partners, MSF and ICRC, to have a more evidence-based assessment of the Humanitarian WASH sector capacities, to review recent impacts of the WASH response in selected countries and figure out the sector wide organizational and operational trends - there is still a lack of clear and strong evidence on the overall humanitarian WASH sector capacity.

In-depth analysis is needed to determine the situation but more importantly as a means to seek a proactive set of remedial actions, create a momentum to rebuild capacity, and advocate to channel financial resources to the humanitarian WASH sector. Emergencies have increased in size and complexity due to urbanization, climate change, and new and persistent diseases (Zika, Ebola, Cholera), increasing of the number and size of humanitarian crisis. While the sector has to meet the humanitarian imperative at scale, the response in the Humanitarian WASH sector has also complexified stretching the response modalities beyond the sectors traditional WASH approach: cash/market modalities, urban settings, WASH-energy nexus, AAPs, gender, disability, protection, localization, humanitarian-development nexus, ....

The purpose of the consultancy will be several-folds:

- Based on the humanitarian responses over the last 5 years what is the current capacity of the WASH sector to meet humanitarian needs especially in hard to reach or conflict zones? The following criteria will need to be considered but not limited to: speed, quality, relevance, complementarity and coverage in efficient manner.
- Once identified the degree to which the response is (in) sufficient, what are the main factors that prevent adequate response?
- How does this capacity compare to humanitarian capacity in other areas?
- After analysing the evidence through literature review and key informant interviews to produce a report with clear recommendations for the WASH sector on area which will require strengthening to respond to new rapid-onset emergencies and protracted situation.

Many other reviews and analyses have been completed or are under way at different levels and this evaluation should draw on these studies to avoid duplication of effort.

The following questions could be used but not limited as framework to answer the research question:
1. What is the performance of humanitarian WASH?
   - Timeliness
   - Coverage
   - Quality
   - Relevance
   - Preparedness
   - Coordination (in sector and with other sectors)

2. What are the resources/capacities available to humanitarian WASH?
   - Funding
   - Capacity

3. What other factors influence performance?
   - What are emerging issues, and how might these influence capacity?
   - Recommendations

Other guiding questions could be found in annex 1.

3) METHODOLOGY

Final methodology to be chosen will be proposed by and agreed upon with the consultant(s) based on a respective technical and financial proposal. However, the following cornerstones will be included, the below need to be read in correlation with the activities list (GWC – consultant(s) activities):

1. Briefing

At the start of the evaluation, the consultant(s) will have briefings with steering group composed (UNICEF WASH Programme Division and EMOPS, Oxfam, ALNAP, GWC CAST), the Strategic Advisory Group of the GWC, WASH Interagency Group

2. Desk Review

Prior to the implementation of the interviews with Key informant, the consultant(s) will be expected to review all documentation related to this topic. GWC will provide some initial documents as starting point from which the consultant will expand the search reviewing databases like google scholar, ALNAP HELP, etc... As mentioned above, the focus will be around humanitarian WASH, humanitarian water and sanitation, capacity building, security, access to remote location, funding of the sector, any other topic related to the subject. We will expect the consultant to look data from 2010 until to date.

3. Key Informant Interviews

The consultant(s) will have to undertake semi structured interviews according to an agreed format via telephone or skype with SAG members, WASH interagency Group, relevant decision-making partners of the strategic priority; national WASH cluster coordinators; OCHA, UNICEF and INGO Country Representative, UNHCR, others clusters (Health, Nutrition etc....) We will estimate that there will be around 70-80 key informants

65 “capacity” include core skills (national and international) for engineering – number of orgs, number of people. core skills for public health (ditto); emerging skills requirements (for ebola, or for large scale treatment plants); knowledge about what works (mentioned above) materials and technology; logistics and ability to get things where needed; for example
4. Stakeholder Survey
A stakeholder survey will be undertaken through a (email/online) questionnaire to stakeholders in different countries (need to be defined).

5. Preparation of the initial findings for workshop.

6. Workshop
A workshop of 1 ½ days will be organized to review the initial conclusion and findings of the review but as well to provide possible recommendation way forward to strengthen the capacity of the sector in area identified by the consultant(s) based on the desk review and Key Informants. This workshop will be an opportunity to brainstorm with some of key stakeholders on the recommendations and review it accordingly using the feedback of this workshop. This workshop will take place in end of April 2019, we will expect around 70-80 participants. It is expected theory of change to be used as methodology of this workshop.

7. Report of reviewing the evidence and recommendations
A draft Report on the evidence on the capacity of the WASH sector and recommendation on area to strengthen will be submitted to the steering group, the SAG and WASH Interagency group. They will have two weeks to review the report and come back with comments. This will be followed by a ½ - one day debriefing meeting between the consultant(s) and Steering Group to finalize the discussion around the findings and recommendations (this could be done remotely). Based on the results of the debriefing meeting the consultant(s) will amend the report and submit a second draft version which will be shared to the wider community. We will give a maximum of one month for feedback which will be to be reviewed by the consultant(s). Formal data-gathering methods should be complemented with periodic communications, individual and focus group consultations so as to create a shared ownership of the findings and strengthen commitment to act on the recommendations.

4) KEY DELIVERABLES AND TIMEFRAME
The gathering of evidence and development of recommendations will be undertaken over 6 months from 1st of January 2019 to end of June 2019. The selected Company will generate the following major outputs according to the approximate timeframe provided. The outputs will be reviewed and approved by the Steering Group before being disseminated more widely. Please note that the timeline is indicative and suppliers are encouraged to bring suggestions to the project timeline.

Gathering of Evidence and develop recommendation to strengthen the capacity of the WASH sector

<table>
<thead>
<tr>
<th>TASKS / ACTIVITIES</th>
<th>DELIVERABLES</th>
<th>BY</th>
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<tbody>
<tr>
<td>Undertake document review, on-line surveys, and Key Informant Interview consultation to capture &amp; analyze achievements, challenges, gaps &amp; lessons learned</td>
<td>Report on initial findings</td>
<td>Mid March 2019</td>
</tr>
<tr>
<td>Webinar on initial finding collected through the above</td>
<td>Report on outcomes of the webinar</td>
<td>End of March 2019</td>
</tr>
<tr>
<td>Prepare &amp; facilitate 1 ½ -days workshop in April 2019 to present the findings, and recommendations for validation and/or addition change</td>
<td>Report on outcomes of the workshop</td>
<td>May 2019</td>
</tr>
<tr>
<td>2nd draft report reviewed by Steering Group, SAG and WASH Interagency group CAST / SAG / Global WASH cluster members</td>
<td>2nd draft report</td>
<td>End of May 2019</td>
</tr>
<tr>
<td>Final report</td>
<td>Final document</td>
<td>June 2019</td>
</tr>
</tbody>
</table>

5) RESPONSIBILITIES
The awarded Consulting Company shall be responsible for ensuring the deliverables and time-frame are met and closely collaborating with the Project Manager and the Cluster Advocacy Support Team. The project will be managed by Global WASH cluster coordinator. The Project Manager is responsible for determining whether the work performed is satisfactory, acceptable and in accordance with the contract deliverables.
The Steering Group should be engaged and up-dated during the project timeline. The Steering Committee is made up of UN and NGOs.

6) REPORTING REQUIREMENTS

The report on the analysis of the capacity of the WASH sector and its recommendations:

- Draft that outlines clear evidence-based findings and SMART recommendations. The document will ensure to reflect the field operation to avoid disconnect between Global / Regional and Country operation, with a clear Executive Summary. The draft will be initial submitted to the Steering group, SAG and WASH Interagency group;

- Final of no more than 10,000 words (plus Annexes), with a clear Executive Summary of no more than 2,000 words. This will address as appropriate comments on the draft report.

7) QUALIFICATION REQUIREMENTS

- WASH expertise
- Experience in Humanitarian context / cluster
- Experience in evaluation / review in Humanitarian Context
- Experience in strategy development, coordination, design, implementation, monitoring and evaluation of programmes;

8) ADMINISTRATIVE ISSUES / TRAVEL ANTICIPATED UNDER THIS ASSIGNMENT

The work is to be completed off-site at the awarded Company's location. Only remote surveys/ calls / Webinars etc. should be conducted, except for 1 ½ day workshop, when the consultant(s) will be expected to travel. Travel cost shall be calculated based on economy class travel, regardless of the length of travel and costs for accommodation, meals and incidentals shall not exceed applicable daily subsistence allowance (DSA) rates, as promulgated by the International Civil Service Commission (ICSC).

UNICEF will organize the workshop with participants, agree on the date and book the facilities for the meeting.

A virtual weekly progress meeting with the focal points and the Project manager should be scheduled by the awarded Company and should take place throughout the contract duration.
## ANNEXE 2: ANALYTICAL PROCESS

<table>
<thead>
<tr>
<th>Step</th>
<th>When by</th>
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<tbody>
<tr>
<td>Map key obstacles and challenges described by sector in the TOR, MSF reports, and output from Brussels meeting at MSF in Oct 2017. Prepare these and test/validate at inception meeting in Geneva in Feb 2019.</td>
<td>Feb 2019</td>
</tr>
<tr>
<td>Map out potential country case studies. Review and validate at inception meeting in Geneva in Feb 2019.</td>
<td>Feb 2019</td>
</tr>
<tr>
<td>Undertake main literature review to; drill down into key obstacles and challenges, identify further issues not identified and investigate these.</td>
<td>March/April 2019</td>
</tr>
<tr>
<td>Identify and list the major stakeholders to be interviewed in relation to the perceived capacity challenges and the obstacles faced.</td>
<td>March/April 2019</td>
</tr>
<tr>
<td>Conduct KIIs on a semi structured basis, exploring new themes as they emerged during the work.</td>
<td>March/April/ May 2019</td>
</tr>
<tr>
<td>Undertake country visits (2 full and 2 partial/piggy backing). Undertake 4 desk-based studies which included country literature review and limited in country key informant interviews. Reviews conducted in a semi structured way, mapping themes identified at the global level and exploring new issues as these arose.</td>
<td>April/May 2019</td>
</tr>
<tr>
<td>Undertake a WASH agency capacity survey in order to map key capacity parameters in the largest agencies and a limited number of small agencies. (In the event this yielded just 6 response so further information was subsequently gathered by phone and email)</td>
<td>April/May 2019</td>
</tr>
<tr>
<td>Analyse data from all sources, mapping out and triangulating for major patterns. Formulate key findings and recommendations accordingly.</td>
<td>May 2019</td>
</tr>
<tr>
<td>Test key findings and recommendations through draft submission to steering group. Revise in light of keys clarifications and suggestions (that felt valid to research team).</td>
<td>May/June 2019</td>
</tr>
<tr>
<td>Submit finalised findings and recommendations at GWC meeting. Workshop these findings at the sector then steering group level. Revise and finalise for the final report.</td>
<td>June/July 2019</td>
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ANNEXE 3: CASE STUDIES SUMMARY OF FINDINGS

1. Bangladesh
2. Central African Republic
3. Democratic Republic of Congo
4. Myanmar
5. South Sudan
6. Mali

BANGLADESH

Context characteristics
Within the month after Aug 25th 2017 around 500,000 Rohingya refugees fled from Myanmar to Cox's Bazar district in Bangladesh, with many of them concentrated in the Kutupalong mega camp. (There were around 150k pre-Aug 2017 caseload). By late 2018 there were 900,00k refugees in camps, and over 1.2 million in need (ref JRP 2019). Protection and over-congestion (population density as high as 8m² per person, compared to the international standard of 45m²) were the biggest humanitarian challenges. In 2018 more than 200,000 refugees were residing in areas that were expected to flood or collapse with the rainy season and this still remains a problem. The rapidity and scale of the exodus, mainly into what became the largest refugee camp in the world, meant that actors had to scale up massively. For example, the planned (AWP) UNICEF country budget for 2018 was around $340 million and the overall country budget increased by just about 43% with the refugee response. Oxfam surge was even more dramatic: with a country budget of £7 million before the crisis, expanding to £27 million in 2018. Many ad hoc actors, sitting outside normal coordination mechanisms came with cash, hiring contractors and they often undertook very poor-quality work. In WASH the number of actors went from about 180/190 in later 2017, now reduced and stabilised to leave about 30 agencies active. It took around 3 months before the coordination chaos subsided and another 3 before the WASH sector felt on a more controlled and stable footing, by which time they were getting ready for the upcoming cyclone and monsoon season. Despite the Tsunami of work, the unparalleled overcrowding, there was no cholera or other major WASH related disease outbreak, and SAM is around 1%, with GAM around 10-12%. So whatever else is said about WASH we need to take account of these bottom-line achievements, perhaps against all the odds.

Analysis and key conclusions
These top line findings were based upon document review, a visit to CXB with interviews of about 20 people and built upon a solid grasp of the context from being part of the 2018 evaluation of the UNICEF response to the Rohingya refugee crisis.

1. WASH sector programme surge was tested to its limits at the outset, with fund mobilisation and fund pipeline in 2018 adequate, (though funding looks less certain in 2019). Key WASH agencies such as UNICEF, UNHCR, IOM, Oxfam, MSF, ACF, and others were all able to mobilise significant resources and deploy reasonably quickly without crippling institutional or financial constraints. Each one would have found its own business systems tested and stretched to breaking point and they need to learn their own agency specific lessons (beyond the scope of this TOR). However, UNICEF cited that short-term

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66 Data gathered as part of the 2018 evaluation of the UNICEF response to the Rohingya refugee crisis
67 Data gathered verbally from Oxfam’s refugee response manager
contracts continue to negatively impact continuity of staffing. This is something that hobbles all agencies to a greater or lesser extent and links back to short term funding cycles and/or ability of agencies to use flexible contracting systems.

2. The start of the response in Aug 2017 was a free for all, with any notion of quality being absent for most ad hoc actors (notably the many Middle Eastern/Islamic actors) and sometimes questionable work in the early days from the established WASH sector agencies (sector decommissioning of latrines and water points is around 17% overall). This was to some extent predictable given rapidity, scale and congestion, but ultimately uncontrolled without clearly agreed sector wide enforceable standards, and the absence of the means for the Govt to control this in the immediate aftermath and for the following 6 months. Even UNICEFs bold and important contribution to significantly scale up latrine construction through the use of the military did not fulfil its potential because standards that incorporated best practice were not adhered to (ref 2018 evaluation).

3. In the largest, most overcrowded and lumpy/hilly refugee camp in the world, populated by a deeply conservative refugee population that places massive restrictions upon its women, getting latrines that worked for women and vulnerable groups was always going to be a near impossible task. All the more so when communal latrines in response to the scale of the task were and continue to be rolled out. This solution along with the supporting HP programme, in general failed to meet the needs of many adolescent girls and women, yet continue to be the best blunt tool the WASH sector wields. As noted by Maria Ferrante, protection coordinator for UNHCR “the solution can only be found within the house”. This is evident from the many households that have their own ad hoc and sector unsupported latrines in their shelters, often leaking faecal matter into the environment.

4. Strategy development for the sector has of course been a massive undertaking and significantly complicated because of a desire not to introduce permanency into camps, DPHE having little capacity in CXB, and having the big 3 UN agencies as equal and sometimes non collaborating WASH centres of gravity. These combine with the systemic problem of only ad hoc linkages with the longer-term sector planning undertaken nationally by DPHE/ADB/WB. A strategic response to dealing with the massive FSM is still outstanding and there have been 5 SWM studies that have yet to provide coherence and clarity. Strategy development is still too piecemeal, progressing too slowly and does not provide a medium term 2-5-year link between humanitarian and development work.

5. The response of the WASH sector as a whole has undoubtedly been driven by a public health/outbreak prevention modality from the outset, while trying and not always succeeding to take into account protection. AWD planning last year was described as coming together late but ultimately showing effective intersectoral coordination. None the less what is striking, even at this stage 20-months in, is how clear linkages between WASH, health and nutrition information systems are still lacking. There is insufficient data congruency between sectors because of understandably different sector catchment areas (camp level for WASH, PHC for health) and little regular information exchange to use this to drive localised outbreak response and prevention.

6. The conditions in Cox’s Bazar (quite secure, agencies concentrated in one location, relatively permissible Govt environment and many tourist hotels as it is a beach resort) is proving to be a fertile ground for the humanitarian system to mobilise its full tool box of capacity building and workshopping. “Death by training” describes the painful experience of one overloaded and understaffed senior staff member in Cox’s bazar working there for more than a year. It is symptomatic of the humanitarian system over indulging itself and complicating matters when it is allowed to gorge itself on a feast of issues without prioritisation. It is observable that everything is important and necessary, so nothing can be deprioritised, underpinned and driven by the fact that all rights are indivisible. There are significant opportunity and direct costs entailed, yet these are never measured as a whole and so it is hard to say anything categoric

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68 Key informant interviews both in 2018 and 2019
69 WASH sector data CXB April 2019
70 The WASH sector coordinator suggested perhaps 40% of women and girls don’t use the communal latrines
about system wide efficiency. (It would be quite easy and illuminating to gather data from all the hotels on training courses and workshops run.)

Figure 1. Incoming funding in Bangladesh per donor in million USD (source: FTS).

Figure 2. Percentage of incoming funding in Bangladesh per sector (source: FTS).
As part of the “WASH sector capacity assessment” study commissioned by the Global WASH cluster and supported by OXFAM, it was decided to conduct a series of case studies, including one on the Central African Republic. The situation in this country is indeed an excellent illustration of the contexts in which humanitarian needs overlap with those resulting from extremely deteriorated development situations, but where insecurity remains high, marked by numerous abuses against both populations and aid actors.

Inventory of the resource
CAR has significant surface water resources thanks to the two main catchment areas: the Chari basin in the north and its tributary the Logone and the Congo basin in the south, whose main tributary is the Oubangui. The water from surface aquifers, taken from the sands of river beds, is collected using traditional catch basins. Groundwater resources consist of several aquifers in quartzitic, shale and carbonate substrates allowing capture by traditional and modern wells and boreholes, whose average depth is about 60 metres for a mainly clayey and sandy alteration of about 25 metres on average. Before the crisis, access to water and sanitation was very unsatisfactory. In 2000, the drinking water supply rate was 55%, 48% of which was in rural areas; in addition, households had to travel long distances to reach drinking water sources. In urban areas, the Société de Distribution d’Eau en Centrafrique (SODECA) serves 11,500 subscribers, including 8500 in Bangui and 3000 in seven (7) secondary centres. Of the 31 cities with more than 10,000 inhabitants, only eight (8) had a drinking water supply system in 2000, which represents a current coverage rate of 22% and this has not changed since then. Even in Bangui, there are neighbourhoods that do not have water and UNICEF decided to do water trucking instead of finding a more durable solution as development funds were not really available to engaged in a real “urban wash development operation”. In rural areas, there are currently 2,900 modern water points built throughout the country, representing a coverage rate of 34 per cent of the rural population. Considering that CAR has nearly 9,000 villages, rural and semi-urban centres, the rate remains very low. In addition, there are also huge spatial disparities with rates ranging from 2 to 66%; in addition, there are 20 to 25% of pumps that fail.

The crisis
The political and military crisis that will begin in 2013 is part of a political failure of the CAR, alas in time. It is characterized by interfaith and inter-community clashes linked to a political-military crisis but also an economic crisis (control of resources) with many abuses and significant population displacements. Constrained by Operation Sangaris and the deployment of UNAMSAR, the crisis dynamic goes through optimistic periods (with elections going well) and phases of regression, with abuses (including against NGOs) and additional displacement. In a context of very sharp deterioration in development gains, this crisis is contributing to the creation of major humanitarian needs, both sectoral and multisectoral. In some areas that are calming down, people are starting to return but are finding dramatic situations in the areas of return, including contaminated wells, destroyed infrastructure.

The situation in the WASH sector and the answer
The WASH sector’s response attempts to manage a disastrous development legacy on which the effects of a dramatic crisis are superimposed. This involves drilling and rehabilitating many boreholes, improving existing traditional wells (copings, installation of hand pumps) and rehabilitating springs. The training of artisanal repairers and the establishment of water point management committees (collection of contributions, dissemination of hygiene messages) are an integral part of the response.

In emergency situations, with massive displacements and few resources, systems for pumping, treatment and distribution, water trucking and installation of bladders and monitoring of water quality are set up: (physico-chemical, bacterial and residual chlorine analysis) Sanitation in emergency contexts (population displacements) requires the installation of: emergency latrines with slabs and covers. As part of the cluster strategy and taking into account that the sites are becoming sustainable. Semi-durable latrines with cemented and drainable reserves should be made. Channels are being set up, particularly with local actors...
(identification of spill and critical storage points). To improve the response over time, the cluster is working on Ecosan latrines and promoting FAST approaches to the return of displaced people to their areas of origin. In terms of hygiene, the answers include education, mass awareness, distribution of hygiene kits with PURE (which has a dual function of coagulation/flocculation and disinfection) and aquatabs.

The constraints

Access/Security
With the unpredictable changes in conflict dynamics and the frequency of abuses, including those affecting NGOs, security is one of the major constraints to the WASH response. This requires a presence in the field, both through the execution of the works and for the efforts of the local committees’ awareness-raising and training activities. In fact, in a context where the State no longer has any authority on the ground, this insecurity affects everyone and represents a very important obstacle to the implementation of quality WASH actions. Access to areas remains difficult and attacks and threats against NGOs and businesses continue despite advocacy efforts with UNMISMA.

Logistical and physical access constraints:
In fact, for a whole period of the year, the state of the roads is so disastrous and requires such resources that operations to support the rehabilitation and development of WASH resources on the ground are very limited. Sending equipment from Bangui is very expensive and deploying teams remains difficult. The aircraft is often the only but expensive solution to ensure an operational presence.

Financial constraints
Given the importance of the constraints, WASH operations in CAR are very expensive. Faced with considerable needs resulting from the legacy of non-development and the effects of the crisis, the huge deficit and permanent financial deficits. In 2018: $42.5 million to respond. Only 5% could be mobilized. Many needs are linked to the development deficit before the war, but given the absence of developers, it falls on humanitarian aid workers without being given the means to do so.

Capacity of national actors
The government partners (the DGRH (Direction Générale des ressources hydrauliques) and ANEA (Agence nationale de l'Eau et de l'Assainissement) and SODECA (Société de Distribution de l’Eau Centrafricaine) are severely lacking in financial capacity, both in equipment and quality personnel. There are very few national NGOs capable of being serious partners for WASH. Major efforts are needed to strengthen their capacities. National private actors are also very weak. The market has recently been opened up to drilling companies, especially international companies with experience. The ANEA’s time costs were 12 M CFA. The price has been halved with the recent end of the monopoly situation.

Future risks
The current fear is the arrival of EBOLA in the area from the DRC. There has been work to prepare an emergency plan, but the Government does not have the means. Traders travel to and from affected areas in the DRC, creating a high risk. But the level of preparation is very insufficient, particularly in terms of dissemination.
Coordination

The WASH Cluster was active in 2013 and since then 4 sub-clusters (Bambari, Bouar, Bossangoua and Kal Bandoro) and working groups have been created to ensure a finer mesh of presence in the field. WASH coordination is ensured by WASH specialists who must maintain a certain neutrality, which is far from easy with their “double hating”. Cluster coordinator positions are short-term positions with a very high turnover, resulting in significant loss of information and very poor capitalisation. It is essential to have information managers and a capitalization of information. Intersectoral coordination, particularly with health, has recently expanded significantly.

Figure 3. Incoming funding in CAR per donor in million USD (source: FTS)

Figure 4. Percentage of incoming funding in CAR per sector (source: FTS)
Funding:
Overall funding for the WASH sector in DRC has reduced lightly over the last 3 years mainly caused by ECHO’s withdrawal of the cholera response. In 2018, the WASH sector was funded at 26%, being the 8th out of 12 sectors to be funded (Source: FTS). WASH actors are able to attract funding for WASH activities thanks to other funding channels (ex; Ebola in NK, Returnee crisis in Kasai). While WASH needs are huge and very disparate, this still represented 25 million USD in 2018 (this was 20 Million in 2016) allocated to the WASH sector, to which needs to be added some funding for Ebola response for which 80% of the activity is WASH related.
Given the increase of humanitarian crisis worldwide, it is likely that humanitarian and WASH funding for DRC will not be on the rise. This should lead us to question and improve the efficiency of the response. The DRC case study shows that it is not a question of funding but a question of 1) how the funding is currently spent 2) technical capacity of spend it.

Efficiency
Each agency’s support costs and layers of intermediaries in the WASH response put more pressure on efficiency. Some WASH programs (eg: DFID) go through, UNICEF, INGO, a local NGO for HP and private companies for construction. While it can be argued that there is added value to this in terms of sustainability and community appropriation, it can take away the efficiency of the response. The added value of funds being channeled systematically through UNICEF (whose support costs can be particularly high) needs to be explored and demonstrated. DFID has reported considering channeling its funding directly to INGOs to the reduce support costs linked with UNICEF managing its funds.

WASH technical capacity (HR):
- Overall difficulty in recruiting senior WASH staff in international positions. DRC is characterized by a frequent first missions especially for INGOs. (This is not necessarily a negative, but the problem is that they are not supported technically and the length of their contracts are short -6 months).
- High turnover of staff which does not allow sufficient time to understand the context (including standards/in-country norms/strategies from the government or UNICEF) and its actors and therefore to be reactive and effective.
- General low technical capacity of international and local organizations reported. One donor reported that even if they had additional funding for WASH in country, they wouldn’t know which organization to give it to.
- Weak capacity of humanitarian actors to carry out activities in an urban context outside of HP (focus on urban sanitation while water contamination is the main source of cholera epidemic);
- The presence of humanitarian workers in the WASH sector for several decades has made it possible to train many national staff (particularly in the east of the country), therefore strong technical WASH capacity of national staff can be drawn up.
- Although it remains a challenge to recruit national staff in remote areas where humanitarian presence is fairly recent (Kasai for instance).
- KII in INGOs have reported that a number of their technical national staff have been recruited by UN agencies offering much higher salaries.
Impact of WASH interventions and sustainability:
Sustainability is one of the biggest challenges especially in a context of aid dependency and insecurity. This requires high levels of investment in order to understand local habits and social interactions (to maintain infrastructures), this is not necessarily a strong point of humanitarian actors + it is difficult to envisage sustainability without real commitment from government actors.
This can be explained by several factors:
- Lack of community ownership of facilities (due to heavy dependence on humanitarian aid and inappropriate community mobilization techniques and unfavorable security conditions).
- Lack of involvement of local authorities who do not feel concerned by humanitarian actions
- Short humanitarian funding cycles (e.g. RRMP) or lack of funds for maintenance and repairs
- Armed conflict which damages infrastructure
- The sustainability of interventions is also very much linked to staff turnover
- There is an issue of length of funding cycles and also visibility of funding for WASH which has an impact on the quality and sustainability of the response.

Working with local/national actors
- Very difficult in DRC given the country's history and the presence of humanitarian aid since 94 + Governance is very low/there is a culture of kleptocracy
- Generally low capacity of government staff puts additional pressure on WASH sector. This is also linked with HR being absorbed by international actors who pay higher salaries than the government
- Aid dependency (which goes along with low level of commitment from local authorities and communities) creating a general fatigue resulting in additional pressure on international actors.
- This has created a vicious circle and a general and mutual mistrust between authorities and humanitarian agencies, where it is difficult to envisage real and productive collaboration. In 2019, DFID retracted its funding of a large 10-year program “Villages et écoles assainis” which was directed to the government, given the low levels of results achieved.

Coordination:
Effective coordination depends on the right staff being in place. DRC is witnessing significant HR gaps in terms of cluster coordination\(^1\) (at the time of the visit at least); national cluster coordinator position was vacant from October 2018-April 2019, no cluster coordinator for the North Kivu + high level of UNICEF HR resources being diverted to the Ebola response + high turnover in the cluster coordinator positions for which the minimum length of contract is currently 6 months+ Clusters are sometimes being led by co-lead agencies not are not necessarily trained on the 6 core functions of clusters
Cluster coordinator positions are partially funded, and therefore filled by people who are not working 100% for the cluster but rather 20% and 80% UNICEF programming\(^2\). This poor coordination has an impact on:
  - Capacity to advocate for more funding for WASH
  - Capacity to bring on board the adequate technical expertise
  - Some funding opportunities being missed\(^3\)
  - Poor standardization of approaches and solutions implemented by actors
  - Weak links with other sectors (ex: Ebola response in NK)

Mutual mistrust between INGOs and UNICEF means that they are not necessarily working together on a common agenda, something which could be addressed with better coordination. Some INGOs have put forward UNICEF’s lack of coordination and increasing pressure to cut support costs and to increase cost/beneficiary ratios. Meanwhile, UNICEF has criticized the poor WASH competencies of INGOs in country.

\(^1\) This is partly due to an internal restructuration process which was initiated 2 years ago
\(^2\) According to the new strategy Cluster Coordinator position will soon be filled by people covering 50% NFI CC and 50% WASH cluster
\(^3\) Ex: 90 million from DFID for a response addressing emerging needs created by Ebola crisis on other sectors has been misused (this was the case during the visit, might have changed since then), given the lack of reactivity of the WASH cluster. Given the absence of a national WASH cluster coordinator at the end of the year 2018, the 4W was not carried out and no funds could be advocated for
Pressure on local organizations which have various partnership agreements with UNICEF but do not necessarily have the organizational and technical capacities to manage various programs at once;

**Aversion to risks:**
- Not particularly noted in DRC, despite the security threats in NK.
- The access issue is more linked with road access and logistical difficulty to respond in certain areas and the fact that responding in remote areas is more expensive and does not fit the beneficiary/cost quotas pushed by donors.
- General recognition that local actors are much better placed to provide WASH assistance in insecure areas. Many KII have shown that in DRC local actors can (and are often willing) to take this risk on behalf of international actors but that there is low investment in capacity building of local actors (technical and organizational).

**Preparedness**
- Insufficient investment and focus is put on preparedness despite general recognition of the need for preparedness and of the vulnerability of certain areas (ex: vulnerability to cholera, or frequency of displacements)

**Capacity to Scale up:**
- Capacity to scale up highly depends on the availability of own non institutional funds (MSF, ICRC but also Save the Children, Tear fund etc.) and/or cash availability to give funds in advance in case of administrative delays in processing requests or in sending the funds.
- DRC case study does not confirm the position of many (referred to in the TOR) that fewer agencies are willing to intervene in the first 3 month of a crisis (the RRRM mechanism was designed exactly for that, and delays are under 30 days after an alert has been launched). It is more a question of the quality of the response when deployed and if they are able to respond (capacity to advance funds).
- Some KII reported the difficulty to scale up linked with the ability to recruit technical staff that can be quickly deployed in the field.

**Advocacy:**
- This key function of the WASH cluster is not well 1) understood by some cluster leads or co-cluster leads 2) carried out.
- Difficult for UNICEF in DRC to advocate for better governance as there has been a political crisis over the past 2 years + significant HR gaps.

**Links with other sectors:**
- Some WASH funding has been channeled through other sectors or programs (in the case for the Ebola response or for Nutrition programs) which are expected to address WASH issues. Nevertheless, there is little evidence to show that these sectors have the technical capacity to implement WASH programs and that there has been sufficient technical training to support these staff.
- This is further impacted by the fact that, in the absence of cluster coordinators and in light of the low allocation of UNICEF staff's time for cluster coordination, one can doubt the effectiveness of the WASH cluster representation work at inter-cluster meetings. Plus, there seem to be very few links between the WASH cluster and the Ebola response in NK - the latter has its own set of coordination mechanisms.

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74 WASH and Nutrition Strategy DRC
Figure 5. Incoming funding in DRC per donor in million USD (source: FTS)

Figure 6. Percentage of incoming funding in DRC per sector (source: FTS)
Context characteristics
Myanmar's long running armed conflict and ethnic tensions are well documented, as are the very restrictive access conditions that arise because of these. Needs arise due to conflict displacement and high levels of dependency upon services in IDP camps, alongside chronic poverty in villages which is more of a developmental priority. Myanmar is also highly natural disaster prone requiring humanitarian actors to also have to an ability to respond to the often less politically contentious needs associated with these, though natural disaster will also affect areas of conflict too. The map (from Myanmar HRP 2019) shows main areas of conflict and related people in need by township.

The variety of needs, access conditions, actors involved etc, mean there is a somewhat complex mosaic of coordination, requiring both coordination of humanitarian situations led as much or more by the international community, as well as natural disaster coordination through Govt led mechanisms, and longer-term development mechanisms. The humanitarian WASH cluster coordination notionally covers the majority of needs everywhere, but of course access to some locations means this is often very limited in areas out of Govt control. There is no dedicated Govt development coordination mechanism and limited development resources deployed in conflict affected areas. This is understood to contribute to the demands upon the cluster to provide support where development would be more appropriate.

Analysis and key conclusions

1. The highly restrictive situation in Rakhine is a clear case of the WASH sector needing to mobilise to provide assistance that simply would not otherwise be available through Govt, NGOs, Private Sector or even the national Red Cross society (would not be welcomed by Muslim populations). This is a classic situation that illustrates the added value of the WASH sector to address gaps that no one else can realistically fill due to the political situation. In turn this means a high level of dependency upon the WASH sector for meeting chronic and so predictable needs, not just for emergency work for IDPs but also longer-term development in the villages.

2. The highly yet differently restrictive situation in Kachin and Shan states shows that national actors can and have mobilised to respond, so in such situations the issue for the WASH sector is how to effectively support at a distance and add value. In these cases, the WASH sector can empower local actors by having clear, consistent and coherent standards and monitoring tools, so national actors can have the best chance of replicating these in a way that meets expected standards and funding conditions.

3. Consortium funding mechanisms that closely control technical quality and provide mid-term funding timeframes, such as DFID multi-year HARP mechanism can greatly improve consistency of approach and adherence to standards and enable more durable solutions to be developed. However, there is invariably a tension between standards supposedly “imposed” from above and the felt need have locally specific approaches and of agencies that wish to keep a level of separation from joint standards.

4. The experience of developing monitoring systems and the time taken before these are really embedded, echo the experience of the author in countless other situations, suggesting this is a systemic problem. The issue that seems to arise is that any pre-existing tools get constantly renegotiated so it takes a considerable amount of time and emergency, often invested just after the “hot” phase of a crisis before robust systems are put in place, perhaps only after some years.

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It ranks 2nd out of 187 countries in the Global Climate Risk Index. It also ranks 12th out of 191 countries in the Index of Risk Management (INFORM) - 2018 Interim Humanitarian Response Plan, Myanmar
Figure 7. Incoming funding in Myanmar per donor in million USD (source: FTS)

Figure 8. Percentage of incoming funding in Myanmar per sector (source: FTS)
SOUTH SUDAN

Political turmoil led to the outbreak of violence in Juba on 15 December 2013 and conflict quickly spread to other areas of South Sudan. 2 months later, on 11 February 2014, the Emergency Relief Coordinator declared the crisis in South Sudan a ‘Level 3’ system wide emergency for an initial three-month period. About 1 million people were on the move. In the first 6 months of the year 2014, aid was targeting 2.6 million people out of almost 5 million in need. The spread of displaced people complicates matters by requiring simultaneous responses in many locations. In May 2014, a cholera outbreak required a national-wide response. With such important needs rising quickly, actors had to scale up massively and fast. For WASH, 52% of the plan requirement was funded ($60 million out of $127 million) in June 2014.

The L3 system wide emergency response was extended four times, ending on 5 May 2016. After this “scale down” conflicts and displacements continued. By late 2018, almost 4.2 million people had been displaced since 2013. After a new peace treaty, the aid community is hoping to start implementing a development response. In May 2019, development funds have not yet received any funding process. There are doubts about the country capacity to shift away from emergency response at that time.

Access
Securing access to affected populations was a major challenge. Obstacles included active combat, looting of aid supplies, the killing and harassment of aid workers and bureaucratic impediments on road, river and air travel by both sides to the conflict. Throughout 2014, many roads were closed due to insecurity.

Since early 2019, communal violence and cattle raiding continued to affect the security environment across South Sudan. Alarming spike in communal violence and cattle raiding incidents has been observed as compared to the corresponding period last year, marking 163% increase in civilian casualties.

Government
Challenges with the government have increased over time with aid seen as the “new oil” in South Sudan. There are increased frictions with the SSD government on the numerous fees falling on humanitarian actors: work permit prices, movements of staff within the country have been conditional to possessing a work permit, new costly vehicle registration requirements, heavy oversight and expensive drug destruction etc.

HR
While agencies have since scaled up their capacity, staff numbers are in some cases still lower than before the crisis. Many local staffs are unable to work in some locations given the risk that they will be targeted and many have left the country.

In 2019, the government has newly forbidden all entry position jobs to be covered by expat staffs. Yet, there is no school in SSD that offers training on WASH related activities and local capacity in WASH is limited. It is therefore expected that, before NGO are able to invest in national staff capacity building, there will be an extra shortage of WASH capacity in 2019. ACF adapted by creating a new position deputy program manager that can complement the national PM with technical or hardware skills. Also note by many, there is less and less technical expat staff and more and more “managers” profiles. High turn-over and staff refusing to work in risky areas is also more frequent.

Number of partners
Already in 2012, the SSD WASH Cluster reported that reduced funding within the cluster had limited the number of WASH partners able to respond to the growing humanitarian crisis, and had restricted the cluster lead’s ability to continuously resupply the core pipeline which partners rely on.

In 2014, the cluster reported that unpredictable access since the start of the crisis has continued to stall scale-up of emergency WASH service provision in some locations. Comparing 3W of different clusters, it appears that the nutrition and food security clusters had a faster increase of actors responding to the crisis and across the territory than some other sectors like WASH, shelter and protection. In February 2014, 18 IDP sites out of 114 were receiving WASH services. According to OCHA SSD Crisis Response Plan, 41 partners were registered and responding to the crisis. What has worked in 2014 to increase coverage: Rapid response mechanisms have helped agencies scale up response in hard-to-reach areas, despite the volatile security situation, thanks to organizations with high capacity and experienced staff taking on responsibility for key sites.

76 South Sudan - Access Constraints: August 1, 2014 (Online)
77 South Sudan cap mid-year review 2012 (online)
In 2019, the Global WASH Cluster reports having nearly 80-100 WASH partners. There is at least one partner in each province but there are pockets where no actors are present. There has been an increase number of new local civil society organisations registered. However, concerns have been raised regarding some NGO limited technical capacity. More organisations have not been synonym with increased capacity in South Sudan.

In South Sudan, from 2014 to 2016, the WASH component of the Integrated Rapid Response Mechanism to delivery of NFI. EP&R is sectorial. The deployments of EP&R WASH partners are functional but challenging. In 2018 there were 64 deployments of only 6-7 WASH EP&R actors. Some actors report that EP&R is increasingly cumbersome and quality was decreasing since the leadership fell under IOM (e.g. partners do not receive post intervention reports).

Targets, coverage face to increasing needs
In February 2014, the WASH cluster and partners activities targeted 2.6 million people for the first six months of the year 2014. In June, with 2.4 million people reached, the target had almost been reached, and it was revised to assist 3.8 million by the end of 2014.

In 2019, WASH needs are persisting. The food security and nutrition monitoring system South Sudan (FSNMS) from July/August 2018 shows that 29% of the population only has access to safe water, 90% at least practices open defecation, 13% only has access to WASH NFI's (such jerry cans, soap and mosquito nets), 75% reported households with members that had been self-diagnosed with a water-borne illness in the previous two-week period). According to HRP/HNO, people in WASH need in South Sudan is increasing: 3.8M in 2014, 4.73 M in 2016, 5.1 M in 2017, 5.6 M in 2018, 6 M (5.7 M + 0.3 M refugees) in 2019.

Quality: the minimum
During the first months of the crisis, mortality rates in refugee camps remained below emergency thresholds. However, standards adopted and reached in POCs until May 2014 matched Sphere standards for the very first phase of an emergency in most camps: “During the first phases of a rapid-onset crisis, communal toilets are an immediate solution with a minimum ratio of 1 per 50 people, which must be improved as soon as possible. A medium-term minimum ratio is 1 per 20 people”. “Survival: water intake (drinking and food): 2.5–3 litres/person/day”. Little water and almost no sanitation were delivered.

In 2019, quality remains a challenge despite training done. With access constraints, partners are not able to revisit the sites and check the quality of the intervention. More generally, the question of standards and what should be monitored is complex. A distribution of soap is often seen as an achievement in itself. However, where there is no access constrains (POC), many actions were taken to push actors across sectors to work on gender and integrated transversal issues. The Wash Cluster reported that chlorine free residual check by WASH actors on their own services seems well done. But there are more successes with water supply than sanitation and hygiene.

Funding
Tracking funds for WASH in south Sudan is complex. There is no clear visibility and predictability for actors. Reported funding in 2013 was USD 917 million. With Level 3 emergency, South Sudan attracted USD 2025 million in 2014. Afterward, funding levels have dropped significantly compared in 2015, to remain relatively stable in 2016, 2017. Since 2017, funding has decreased progressively.

In 2019, evaluated needs have been reduced of 20% due to the Peace Agreement. HRP was opened to development actors. But with no guarantee of stabilisation, there has been no donor funding so far. Generally, donor fatigue is felt by most actors in SSD.

Coordination
In 2019, some coordination mechanisms are not effective in South Sudan. (e.g. no real Rapid Response Mechanism.) Leadership/coordination/communications by OCHA is seen as challenging. Coordination with health Cluster is challenging at the moment. There are very little contacts between the 2 clusters. Epidemiological investigations are reported to be weak and impacts WASH response quality.

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78 WASH Focus In Response To The Conflict Crisis In Country (online)
79 South Sudan, revised Crisis Response Plan 2014 (online)
80 Sphere Handbook, 2nd edition (online)
81 FTS
Figure 9. Incoming funding in SSD per donor in million USD (source: FTS)

Figure 10. Percentage of incoming funding in SSD per sector (source: FTS)
Mali

Objective of the case study

As part of the "WASH sector capacity assessment" study commissioned by the Global WASH cluster and supported by OXFAM, it was decided to conduct a series of case studies, including one on Mali. This context could indeed illustrate both the difficulties linked to a political crisis, opposing a wide range of arms bearers and having taken root over time.

Status of the resource

Groundwater resources in Mali are generally under-exploited and there are no significant general problems with groundwater availability. Nevertheless, the increase in pressure on this resource with urban planning, the increase in drainage for agriculture and livestock, but above all the reduction in rainfall and the increase in drought episodes pose a real threat to this availability. The total groundwater resource in Mali is estimated at 2.7 trillion m³. The level of groundwater exploitation, mainly for drinking water supply, is considered low: it is estimated at 66 billion m³. Groundwater is widely exploited by large-diameter wells and boreholes, including about 15,100 boreholes and 9,400 large-diameter wells (information from the National Water Directorate (DNH) for 2003). Some of these wells and boreholes exploit the surface water table, which is regularly replenished by the river and the waddis. Many of the regions affected by the 2012 conflict are dependent on transboundary aquifers for their water supplies.

WASH sector in Northern and central Mali

Access to water and sanitation, already precarious before the crisis, has become even more critical due to the abandonment of many projects. In the northern regions, this situation is aggravated by a weak state presence and by the conflict which has left a lot of dysfunctional infrastructure beyond the glaring lack of management and maintenance (average TDC pump failure rate of 30%, DNH2017). The adverse impact of climate change has also made the resource scarce and put water users (host communities and their displaced people, pastoralists and their livestock) in competition with each other. Food/AGR and Health/Nutrition. The degradation of the WaSH sector leads to morbidity and diarrhoeal excess mortality in communities affected by malnutrition. This sector faces a wide range of challenges

The difficult logistics and the related surcharges:

The logistical difficulties of working in North Mali are well known and make it costly to set up a WASH project: i) long distances (extension of supply roads); ii) state of deterioration of existing roads and tracks, with very seasonal difficulties with the rainy season which makes work almost impossible; iii) traffic difficulties in desert and sandy areas.

Access to at-risk areas

The 2012 crisis has resulted in a sharp reduction in the access of territories and their populations to aid actors due to a deterioration in the security situation that the signing of the Peace Agreement in 2015 will not have reduced in the north, and which does not take into account the rise in violence and conflict in the centre of the country. While humanitarian actors, including those in the WASH sector, have so far been spared by radical groups, the security analysis reveals 3 types of threats:

- The arms bearers of the movements known as signatories of the peace agreements, who have not been disarmed or confined and who then live mainly on robbery;
- Organized Jihad actors who aim at the destruction of the Malian state with fairly clear strategies against the Armed Forces on the ground. On the other hand, they don't seem to be targeting humanitarian aid workers.
- A mass of young people without a future and without hope who can easily be recovered thanks to the power of possessing weapons and who represent a real danger for humanitarian workers.

Faced with these dangers, humanitarian workers, including WASH actors, have developed a series of measures:

- Explain continuously the importance of the work done for the people, the principles that govern it (humanitarian principles) and the nature of the structure.
Work in partnership with uncontested actors. While the solution for the ICRC is natural (working with the Malian Red Cross), for international NGOs, it is always necessary to find local NGOs or local private actors capable of producing the requested work with the required quality, etc. But even this balance with local actors is fragile. Private companies are reluctant to deploy expensive equipment. The technical services also have strong security constraints and limit monitoring and technical support. Tensions to accept companies and local staff increase because there are threats if you do not work with local service providers. Equipment from UNICEF contractors was threatened and looted on Taoudeni.

Strategies had been developed to act during the previous crisis. But with the advent of violent radical actors and the explosion of banditry, it was necessary to change the modalities of intervention:

- Working in more limited areas and reducing mobility: the fact that officers can no longer sleep in villages reduces intervention in the field and makes it particularly difficult to deal with the "soft" aspects of WASH;
- Manage the fact that humanitarian and private contractors' vehicles have been targeted and companies have been ordered to leave their workplaces. The population itself sometimes discourages companies from coming to villages: when there are foreigners, it exposes the villages. The Radicals arrived after and conducted fairly intense and even deadly interrogations.

Overall, the difficulties and associated costs are very considerable. It takes a lot of energy to ensure sufficient access to the land to be able to carry out quality actions there.

**Question of competencies:**
The programmes are implemented by local actors, often with long experience in the area, under the supervision of sub-regional or international expertise. The issue is not so much the competence available as to keep it, given the considerable turnover and frustrating working conditions in the Malian context where access to the field has been so severely reduced.

**Respect of humanitarian principles**
these actions require that the structures and individuals who set them up are not suspected. The deployment of forces such as Barkhane, the FAMa, the G5 Sahel Force and, of course, UNMISMA, all of which are tempted to set up "WASH" QIPs, complicates matters quite a bit.

**A weakening of the presence of technical services**
With the 2012 crisis and the departure of many Malian managers from the northern regions, the weakening of the decentralized State services and the contracting capacity of local authorities in the area, coupled with a low capacity to deploy the technical services that remained in the field, have contributed to reducing their support and monitoring capacities.

**Financing too weak, procedures to complicated**
In Mali, the water, sanitation and hygiene sector suffers from a chronic lack of funding from both the government and donors. Often seen as a development issue, it is of less interest to humanitarian donors and remains massively underfunded.

In these contexts where humanitarian and development are mixed, local actors and international donors very quickly, the question of project financial management procedures arises, both in calls for tenders to recruit NGO partners and for the mobilization of local private actors, who are the only ones able to operate in the field. In this context, Rapid response mechanisms (RRM) remain very good options.
Coordination
The Water, Hygiene and Sanitation Cluster (WASH) was activated in Mali on 5 April 2012 and is managed in partnership with the National Directorate of Hydraulics (DNH), Solidarités Internationale and Unicef. Coordination and exchanges are working quite well in Bamako.

Figure 11. Incoming funding in Mali per donor in million USD (source: FTS)

Figure 12. Percentage of incoming funding in Mali per sector (source: FTS)
ANNEX N°4: AREAS FOR TECHNICAL IMPROVEMENTS

In hard-to-reach areas or in complex, often dangerous contexts, or in large scale emergencies becoming protracted, many of the classical solutions do not work: limited access, limited time and presence, limited capacity, highly constrained logistics, etc. so there is a need to develop alternatives.

LATRINES: FROM COMMUNAL TO FAMILY LEVEL

Among the different subjects which have been debated, the questions of the alternatives to the communal latrines is interesting. Communal latrines for family (rather than institutional) use continue to proliferate for some understandable reasons, but very often fail to meet the expectations of most families and needs of girl's/women and vulnerable groups. The Bangladesh case study highlighted that even at this stage, some 20 months on perhaps around 40% of girls/women did not use communal/shared latrines and instead used ad hoc household latrines and plastic bags/holes within shelters. The extraordinary challenges of the Rohingyas in Bangladesh none the less perhaps highlight the inappropriateness of communal latrines.

A number of key informants felt that it was high time for WASH to move decisively to the use of family latrines in the first phase of response except when populations would only be remaining days or weeks. At the moment some guidance (e.g. WEDC sanitation guidelines) state that communal latrines are the last resort, but all too often it is unsurprisingly the first response but remains the only option for a long time afterwards. In a world in which ODF and the associated family latrines is increasingly a reality for most people, and the need to work towards the “leave no one behind” aspiration of the SDGs, (shared) family latrines must become the way forwards. The implication of this is that WASH must work with shelter to provide a 1 house 1 toilet approach in many situations, which requires joint programming. However, it is clear that situations such as the refugee camps in Bangladesh and elsewhere require an interim/ongoing solution of shared family latrines, between 2 or 3 families.

The case is now made for an assisted self-build latrines, approach to dealing with this challenge. New approaches have emerged to support or direct households to a safe (public health, protection, dignity) and durable (last for years with modest operation costs) solution and WASH can also draw upon experience of supporting shelter self-recovery.

There is one major difference between a shelter and a latrine; an unsafe shelter may harm the family using it, but an unsafe latrine that leaks faecal matter into the environment could contaminate and harm many others. Because of this WASH will need to be more conditional /directional than shelter in order to get the right outcome. The provision of information about what is a safe and durable latrine is not enough to get predictable get large scale replicable quality latrines built (the same can also be said of contractor-built latrines without adequate quality control). In order to achieve such an objective, the degree of input and control has to be considered.

It is important to acknowledge the fact that several institutions (Gates foundation, Veolia foundation and MSF are trying to develop new models of latrines, for instance for above ground toilets. However, many did not find the solutions satisfying and went back to local emergency latrines.

FAECAL SLUDGE MANAGEMENT: A NEW AREA OF EXPERTISE REQUIRED FOR THE SECTOR

At the risk of oversimplification, we can state that 10 years ago, safe excreta management consisted of defecating into a pit latrine, (accompanied by safe hand washing). The Syrian refugee crisis in Jordan and to a significant extent Lebanon has required massive faecal sludge management operations which have broadly speaking required huge budgets to sustain trucking of FS (though without responsibility for FS treatment). In the Rohingya camps the transportation element required manual operations, alongside trucking but also required treatment system to be developed. The WASH sector was thrust into experimenting with new technologies including eco-sanitation solutions. Interventions were piece meal, experimental and effectiveness still not always demonstrated. Despite good work by

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82 See new SPHERE manual
83 http://promotingsaferbuilding.org/projects/supporting-shelter-self-recovery-evidence-synthesis
some agencies the sector as a whole has not collectively delivered on FSM in very difficult conditions. Several people interviewed highlighted that while challenges were new and numerous, and some useful innovation work has been undertaken, the fact that clear FSM strategy for all camps that require it (i.e. sector wide) was still not in place in the Rohingya refugee camps was problematic and a huge public health risk.

**SOLID WASTE CAPACITY AND PROGRAMMING**

Over the years, experience in refugee and IDP camp underlined the importance of proper solid waste management. In urban contexts, such as earthquake in Haiti or conflict in Abidjan, it also emerged as a key component of environmental health. In Bangladesh the WASH strategy for the first 9 months of operation in the Rohingya refugee camps rightly put solid waste as a priority to be addressed at a later stage. However, it was apparent during the April 2019 visit to these refugee camps, that 20 months later beyond small scale household/community bins that macro level interventions had not been undertaken, despite 4 studies undertaken by different organisations. Solid waste has become more of an immediate issue given greater volumes of inorganic waste, the use of latrines as de facto waste bins, the blocking of drainage channels, not to mention the associated vector problems. Does it need more attention earlier on for the sector as a whole given increased urbanisation, types of solid waste and new vector borne disease?

**VECTOR CONTROL**

There is emerging concern about new vector/mosquito borne diseases globally, with Zika and Dengue being two notable ones. There does not seem to be predictive data about the spread of pathogens carried by mosquitoes or the spread of mosquitoes themselves due to climate change. If mosquito related diseases do start to increase dramatically in the coming years such that associated morbidity and mortality rates in relation to diarrheal disease is greater, then WASH will need to more actively consider capacity to work on solid waste management and drainage to mitigate risks. In this respect the BOVA network looks at the built environment in relation to vector borne diseases interventions and might be a body to start working with, alongside strengthening links with existing partners.
## ANNEX N°5: SUMMARY OF FINDINGS AND EVIDENCE

<table>
<thead>
<tr>
<th>Key findings</th>
<th>Sources</th>
<th>Country studies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Key Informant Interviews</strong></td>
<td><strong>Documents</strong></td>
<td></td>
</tr>
<tr>
<td>Major risks on water resources</td>
<td><em><a href="https://www.urd.org/fr/publication/rapport-de-letude-sur-la-cartographie-des-risques-non-intentionnels-futurs/">https://www.urd.org/fr/publication/rapport-de-letude-sur-la-cartographie-des-risques-non-intentionnels-futurs/</a></em>, Existential climate-related security risks, 2019</td>
<td>Mali, Yemen</td>
</tr>
<tr>
<td>Many of the difficulties affecting the WASH sector are shared by many other sectors</td>
<td><em>SOHS 2018, HRP for CAR, Mali, Yeme, Sudan, Irak, Syria,</em></td>
<td>Mali, CAR, Yemen, South Soudan</td>
</tr>
<tr>
<td>Quality of the WASH response in difficult situations not always optimal. This is particularly worrying in outbreak situations</td>
<td><em><a href="https://www.who.int/water_sanitation_health/publications/technotes/en/">https://www.who.int/water_sanitation_health/publications/technotes/en/</a></em></td>
<td>Mali, CAR, Yemen, South Soudan, DRC, Bangladesh</td>
</tr>
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<td>---</td>
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</tbody>
</table>
| 7 | Security affecting access to the populations in need | Almost all KI  
Almost all KI | SOHS 2018, HRP , Evaluations conjointes EHA, REACH Décembre 2018  
*SOHS 2018  
*Evaluations conjointes EHA, REACH Décembre 2018  
*ELRHA, Gap Analysis in Emergency Water, Sanitation and Hygiene Promotion, 2013  
*ICRC 2016, Protracted conflict and humanitarian action: some recent ICRC experiences, International Committee of the Red Cross, Geneva  
*International Review of the Red Cross (2014), 96 (895/896), Michiel Hofman and Andre Heller Pe´rache, From remote control to remote management, and onwards to remote encouragement? The evolution of MSF's operational models in Somalia and Afghanistan.  
Mali, CAR, Yemen, South Soudan, DRC |
| 8 | In conflict areas, humanitarian continuity is often only possible by working with local actors , but it is reported very challenging (ethical concerns, lack of capacity, challenging communications ) A few agencies (ICRC, MSF,...) can intervene in these zones with a real presence. Most of the other will either not be present, or act through remote management mechanisms | Many KI whose agencies are working in conflict zones  
MSF, ICRC, ACF, Red R, consultants, UNICEF  
*SOHS 2018  
*Evaluations conjointes EHA, REACH Décembre 2018  
*ELRHA, Gap Analysis in Emergency Water, Sanitation and Hygiene Promotion, 2013  
*ICRC 2016, Protracted conflict and humanitarian action: some recent ICRC experiences, International Committee of the Red Cross, Geneva  
*International Review of the Red Cross (2014), 96 (895/896), Michiel Hofman and Andre Heller Pe´rache, From remote control to remote management, and onwards to remote encouragement? The evolution of MSF's operational models in Somalia and Afghanistan.  
Mali, CAR, Yemen, South Soudan, DRC |
| 9 | In many contexts, where roads and tracks are in very bad shape, the capacity to access the population in need is limited. Yet, some agencies, mostly those with private funds have more means and can adjust easier with logistical constraints | Mentioned by many KI, but very country specific.  
MSF (2014) Where is everyone,  
DRC, Mali, Yemen, |
| 10 | Local administration, and politics affect the capacity of agencies to deploy in the field | Mentioned by KII in specific contexts  
Agency: MSF, ACF, Solidarités  
Multilateral: SSD  
WASH Cluster,  
Donor: SHA,  
ACAPS (2018) Humanitarian Access overview, August (online)  
UN. (2015). Report of the Secretary-General on the protection of civilians in armed conflict. UN Security Council (online)  
*Deutsche Welle (2017), South Sudan’s visa fee hike a ‘threat’ to foreign aid (online)  
The guardian (2017), Humanitarian work is being blocked by bureaucracy (online)  
Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Mr. Mark Lowcock (2018), Remarks to the Security Council on the Humanitarian Situation in Yemen (online)  
Yemen, South Sudan |
| 11 | Agencies themselves have become more and more bureaucratic and have lost a significant level of agility, (due in part to donor requirements and/or professionalization). Even agencies that do not have to respond to donor requirements suffer from heavier bureaucratic/reporting requirements. | Many KI  
Agency: MSF, CICR  
Multilateral: SSD  
WASH Cluster,  
Donor: SHA,  
MSF (2014) Where is everyone  
International Review of the Red Cross (2011) Volume 93 Number 884, The future of humanitarian action (online)  
IASC (2016) Donor conditions and their implications for humanitarian response (online)  
*USAID, (2017) Efficiency and Inefficiency in Humanitarian Financing (online)  
Mali, CAR, Yemen, DRC |
| 12 | Risks management is increasingly complex (more belligerents per conflict, non-state actors belligerent, more violation of IHL, terrorism ...) This requires agencies to mobilise costly capacity in the matter which not all medium/smaller NGO can mobilised. | Many KI  
https://www.eisf.eu/library/safeguarding-aid-workers/  
Mali, CAR, Yemen |
<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
<th>Mentioned by</th>
<th>Key</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>Rapid response in emergency setting is complex and costly, it requires access to flexible, unearmarked and fast financial means</td>
<td>Mentioned by KI in specific contexts</td>
<td>*ICRC (2015), Urban Services During Protracted Crisis (online)</td>
<td>Mali, CAR, Yemen, South Sudan</td>
</tr>
<tr>
<td>14</td>
<td>Access to sufficient unearmarked, multi-year and flexible funding is determinant to scale up and sustain humanitarian responses</td>
<td>Mentioned by all Key</td>
<td>*ICRC 2016, Protracted conflict and humanitarian action: some recent ICRC experiences, International Committee of the Red Cross, Geneva</td>
<td>CAR, Yemen, South Sudan</td>
</tr>
<tr>
<td>15</td>
<td>Humanitarian WASH is most of the time underfunded, as well as some other related sectors (health), but constant over the past 5 years</td>
<td>Mentioned by many KI</td>
<td>FTS data, HRP for many affected countries</td>
<td>CAR, Mali, South Sudan</td>
</tr>
<tr>
<td>16</td>
<td>Humanitarian organisations that have access to a sufficient level of readily available flexible funds (via their own internal emergency funds or access to loan facilities) shortens reaction times to sudden-onset crises.</td>
<td>Mentioned by all KI</td>
<td>SOHS 2018, UNICEF WASH action in humanitarian situations: synthesis of evaluations 2010–2016 (online), High-Level Panel on Humanitarian Financing Report to the Secretary-General (2016): Too important to fail; addressing the humanitarian financing gap. (online)</td>
<td>Yemen</td>
</tr>
<tr>
<td>17</td>
<td>Existence of systems such as RRM is an asset to increase coverage and speed of the response especially when they have strong leadership and capacity.</td>
<td>SSD wash cluster, SSD solidarities International, global nutrition cluster,</td>
<td>ODI, (2016) Making humanitarian and development WASH work better together, SSD WASH Cluster, (2014), Bulletin Issue #1 WASH Focus in Response To The Conflict Crisis In Country (online), RRM RCA (2017) Rapid Response Mechanism: Central African Republic (online)</td>
<td>CAR, Mali, Yemen</td>
</tr>
<tr>
<td>18</td>
<td>The most significant technical and expertise gaps for WASH humanitarian actors were Faecal Sludge Management, Urban WASH and hydrogeology. Also high level of challenges where reported in emergency sanitation, hygiene promotion and community mobilisation.</td>
<td>S HQ WASH staff, Red R, Bioforce, Solidarités, PU, MSF France, 1 research center : EAWAG, 1 Donor: SHA</td>
<td>ALNAP Doc, Groupe URD Work, OXFAM work, *HIF (2013), Gap Analysis in Emergency Water, Sanitation and Hygiene Promotion [online], *WEDC (2016), Overcoming capacity gaps in fecal sludge management through education and training. (online)</td>
<td>Bangladesh, Yemen, Mali, South Sudan, CAR, DRC</td>
</tr>
<tr>
<td>#</td>
<td>Challenge/Issue</td>
<td>KI Sources</td>
<td>Sources/Notes</td>
<td>Location(s)</td>
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<td>---------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>19</td>
<td>Specific Sanitation and Hygiene challenges in high density contexts, in particular when camps are created fast and last long</td>
<td>Many KI</td>
<td><a href="https://www.urd.org/en/publication/study-report-on-social-water-management-in-the-central-african-republic-2015/">https://www.urd.org/en/publication/study-report-on-social-water-management-in-the-central-african-republic-2015/</a></td>
<td>Bangladesh, CAR, Yemen</td>
</tr>
<tr>
<td>20</td>
<td>A focus towards soft skills linked to hygiene, protection and AAP in the WASH sector is observable</td>
<td>Several KI</td>
<td><a href="https://www.urd.org/en/publication/socio-cultural-assessment-tool-for-wash-programmes/">https://www.urd.org/en/publication/socio-cultural-assessment-tool-for-wash-programmes/</a></td>
<td>Bangladesh, CAR, Yemen</td>
</tr>
<tr>
<td>21</td>
<td>Emergence of new actors in the emergency wash sector, such as military, civil protection (in natural or technological disasters)</td>
<td>A few KI in specific contexts : Donors: Germany, Swiss</td>
<td>Oslo Guidelines, <a href="https://www.urd.org/en/publication/real-time-evaluation-of-the-response-to-hurricane-matthew-in-haiti-final-report/">https://www.urd.org/en/publication/real-time-evaluation-of-the-response-to-hurricane-matthew-in-haiti-final-report/</a></td>
<td>Mali, CAR, Yemen, South Sudan</td>
</tr>
<tr>
<td>22</td>
<td>Shortage in Senior or experienced staff and high turnover of international staff across the sector impacts quality and continuity of response (especially in coordination roles)</td>
<td>UNICEF, UN, OCHA, Wash cluster survey response</td>
<td>*GWC (2008) Global WASH Gap survey</td>
<td>DRC, Mali, CAR, South Sudan, DRC</td>
</tr>
<tr>
<td>23</td>
<td>Growing importance of the different types of surge capacities (either internal or through stand by partnerships )</td>
<td>Many KI from big agencies, but not the small and middle size NGO Survey response</td>
<td>ACF WASH strategy, ICRC HR Model</td>
<td>Bangladesh, Yemen, Mali, CAR</td>
</tr>
<tr>
<td>24</td>
<td>Difficulties to deploy multi sectoral response. Multi sectoral coordination still far from optimal, especially in what related to health, nutrition and shelter. Significant energy is put to improve it in several contexts</td>
<td>Most KI, Global Nutrition, health and FoodSec Clusters, Inter-cluster, OCHA, Survey response</td>
<td>Cluster 2 evaluation, 2010, Transformative agenda, Valerie Amos, 2014</td>
<td>Mali, CAR, South Sudan, DRC, Yemen</td>
</tr>
<tr>
<td>25</td>
<td>Humanitarians do not systematically try and get the hydrogeological information (which is often available).</td>
<td>Several KI</td>
<td><a href="https://www.urd.org/en/publication/study-report-on-access-to-water-in-the-eastern-chad-2011/">https://www.urd.org/en/publication/study-report-on-access-to-water-in-the-eastern-chad-2011/</a></td>
<td>Mali, CAR, Yemen</td>
</tr>
<tr>
<td>26</td>
<td>Variety of delivery mechanisms, ranging from direct to cash, with diverse speeds and capacity to scale up.</td>
<td>KI (Donors and agencies)</td>
<td></td>
<td>Mali, Yemen, South Soudan</td>
</tr>
<tr>
<td>27</td>
<td>Risk of confusion when Military intervene in the WASH sector in conflict zones</td>
<td>KI working with agencies in conflict</td>
<td>SOHS 2018</td>
<td>Mali, CAR</td>
</tr>
<tr>
<td>Page</td>
<td>Text</td>
<td>References</td>
<td>Affected Countries</td>
<td></td>
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<tr>
<td>28</td>
<td>Coordination is essential, as long as it functions efficiently and properly (good coordinators, avoiding conflicts of interests). Coordination has to be more strategic in ensure gap filling and help avoiding duplication.</td>
<td>Most KI</td>
<td>Cluster 2 Evaluation <a href="https://reliefweb.int/report/world/improving-coordination-humanitarian-aid-reflections-cluster-system">https://reliefweb.int/report/world/improving-coordination-humanitarian-aid-reflections-cluster-system</a></td>
<td>Mali, Yemen, South Sudan, DRC, Bangladesh</td>
</tr>
<tr>
<td>29</td>
<td>Preparedness is often weak mostly in protracted crisis but also development countries (underfunded or not a priority), thus affecting the capacity to properly response.</td>
<td>Several KI involved in either outbreak management or natural disasters</td>
<td>*ICRC 2016, Protracted conflict and humanitarian action: some recent ICRC experiences, International Committee of the Red Cross, Geneva * Humanitarian Evidence Programme (2017), WASH interventions in disease outbreak response [online] UNICEF (2019), Water under fire [online] *IASC (2015) Review Of The IASC Level 3 Response By The South Sudan Hct [online]</td>
<td>Mali, CAR, Yemen, DRC, South Sudan</td>
</tr>
<tr>
<td>30</td>
<td>Protection in WASH got significant traction</td>
<td>Numerous KI at both HQ and field</td>
<td>SPHERE Standards new Edition, 2018 <a href="http://www.globalprotectioncluster.org/">http://www.globalprotectioncluster.org/</a> assets/files/field_protection_clusters/Occupied_Palestinian/files/oPt_PC_Checklist_PM_%20in_WASH_programmes_EN.pdf</td>
<td>Mali, CAR, Yemen, DRC, South Sudan</td>
</tr>
<tr>
<td></td>
<td>Attempts to diversify approaches and get more on board with environmental issues are developing</td>
<td>Numerous KI at both HQ and field</td>
<td>CAR, Mali</td>
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<td></td>
<td>The WASH sector is still weak in its advocacy efforts to attract attention, in particular on its critical role in public health</td>
<td>Numerous KI at both HQ and field, INGOS</td>
<td>Mali, CAR, Yemen, DRC</td>
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<tr>
<td></td>
<td>Attempts to diversify approaches and get more on board with environmental issues are developing</td>
<td>Numerous KI at both HQ and field</td>
<td>CAR, Mali</td>
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<td></td>
<td>The WASH sector is still weak in its advocacy efforts to attract attention, in particular on its critical role in public health</td>
<td>Numerous KI at both HQ and field, INGOS</td>
<td>Mali, CAR, Yemen, DRC</td>
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Attempts to diversify approaches and get more on board with environmental issues are developing. Numerous KI at both HQ and field.

The WASH sector is still weak in its advocacy efforts to attract attention, in particular on its critical role in public health. Numerous KI at both HQ and field, INGOS.
ANNEX N°6: ANALYSIS OF FUNDING TRENDS

GLOBAL TRENDS

Figure 1. Global overview funding 2014 – 2018 per sector in million USD (source: FTS)

SPECIFIC WASH FUNDING BY DONORS

Table 1. WASH Funding from 2014-2018 top 12 organizations

<table>
<thead>
<tr>
<th>Top funding organizations</th>
<th>Appeals</th>
<th>outside appeals</th>
<th>Total amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States of America, Government of</td>
<td>386 481 076</td>
<td>67 224 754</td>
<td>453 705 830</td>
</tr>
<tr>
<td>DG ECHO</td>
<td>311 305 752</td>
<td>74 242 468</td>
<td>385 548 220</td>
</tr>
<tr>
<td>United Nations Children's Fund</td>
<td>268 138 015</td>
<td>1 204 336</td>
<td>269 342 351</td>
</tr>
<tr>
<td>Central Emergency Response Fund</td>
<td>214 035 192</td>
<td>53 964 675</td>
<td>267 999 867</td>
</tr>
<tr>
<td>Japan, Government of</td>
<td>81 842 671</td>
<td>143 205 122</td>
<td>225 047 793</td>
</tr>
<tr>
<td>United Kingdom, Government of</td>
<td>193 810 356</td>
<td>27 653 378</td>
<td>221 463 734</td>
</tr>
<tr>
<td>Germany, Government of</td>
<td>117 474 918</td>
<td>72 123 460</td>
<td>189 598 378</td>
</tr>
<tr>
<td>Saudi Arabia (Kingdom of), Government of</td>
<td>126 276 783</td>
<td>45 238 601</td>
<td>171 515 384</td>
</tr>
<tr>
<td>Canada, Government of</td>
<td>83 542 943</td>
<td>25 817 695</td>
<td>109 360 638</td>
</tr>
<tr>
<td>United Arab Emirates, Government of</td>
<td>40 033 079</td>
<td>50 258 284</td>
<td>90 291 363</td>
</tr>
<tr>
<td>Yemen Humanitarian Fund</td>
<td>78 855 271</td>
<td>219 855</td>
<td>79 075 126</td>
</tr>
<tr>
<td>Sweden, Government of</td>
<td>52 967 721</td>
<td>21 886 591</td>
<td>74 854 312</td>
</tr>
</tbody>
</table>
UNITED STATES (OFDA)

Profile based upon KII and publicly available documentation

- USAID have a water strategy 2013-2018. A further updated strategy is reportedly developed, though not available. This policy includes emergency/humanitarian aspects that OFDA typically leads upon. OFDA have publicly available other ad hoc documents such as WASH sector update, WASH nutrition briefing.
- OFDA budget increased substantially in last 10 years. The amount of WASH funding is much larger than 10 years ago, but if you take out Syria, Yemen and Iraq (maybe Nigeria too) funding out of the equation it’s about the same spend as 10 years ago.
- A strong public health driver/focus would be considered a valid and useful focus from an ODFA perspective and more joined up programming with health.
- There is a requirement for strategy development to be based upon needs and gap analysis in particular, rather than developed on the basis of individual agency plans bundled together to create a de facto plan which feels to be the current situation.

Figure 3 USA Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 4. USA Fund distribution per sector in percentage (Source FTS)
Figure 5. ECHO Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 6. ECHO Fund distribution per sector in percentage (Source FTS)
ANALYSIS OF THE CAPACITY OF THE WASH SECTOR

JAPAN

Figure 7. Japan Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 8. Japan Fund distribution per sector in percentage (Source FTS)
UNITED KINGDOM, GOVERNMENT OF 

- DFID has an overall humanitarian reform guideline and this guides its funding support at a system level. This is not sector specific and indicates broad policy direction e.g. such as support for the Grand Bargain. DFID does not provide a breakdown in funds and trends to demonstrate the extent to which its funding support is shifting to support new policy directives.
- Have no wash specific strategy documentation and no humanitarian specific WASH information. DFID position is that it works with and within international standards and protocols.
- There appears not be any data/information available to understand if and how DFIDs position and funding of the WASH sector as a whole or of any agencies in particular has changed over the last few years. Country level patterns may provide the best clue to this.

![Figure 9. UK Total reported funding (inside & outside appeal) in USD million (Source: FTS)](image1)

![Figure 10. UK Fund distribution per sector in percentage (Source FTS)](image2)
ANALYSIS OF THE CAPACITY OF THE WASH SECTOR

GERMANY, GOVERNMENT OF

Figure 11. Germany Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 12. Germany Fund distribution per sector in percentage (Source FTS)
ANALYSIS OF THE CAPACITY OF THE WASH SECTOR

SAUDI ARABIA (KINGDOM OF), GOVERNMENT OF

Figure 13. Saudi Arabia Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 14. Saudi Arabia Fund distribution per sector in percentage (Source FTS)
Figure 15. Canada Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 16. Canada Fund distribution per sector in percentage (Source FTS)
ANALYSIS OF THE CAPACITY OF THE WASH SECTOR

UNITED ARAB EMIRATES, GOVERNMENT OF

Figure 17. UAE Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 18. UAE Fund distribution per sector in percentage (Source: FTS)
Figure 19. Sweden Total reported funding (inside & outside appeal) in USD million (Source: FTS)

Figure 20. Sweden Fund distribution per sector in percentage (Source FTS)
SWITZERLAND

- Humanitarian Aid is one of 5 Switzerland’s International Cooperation 2017–2020 strategic priorities with a budget of 2060 million Swiss Francs (out of a total budget of 11’105.00)\(^84\). A slight decrease in humanitarian funding has been observed from 2017 to 2018. A financial framework on 4 years that allows for multi-year planning. Financial resources allocated to external identities are divided between ICRC (35%), UN (30%) and bilateral funding (NGOs and direct actions 35%).
- The Humanitarian Aid Department has a “SDC/HA Operational Concept 2017-2020 for Water and Sanitation” detailing strategic objectives, operational structure, tools, partnerships and M&E framework. The main activities are listed in table 1 with a special focus in 17-20 on urban settings & sanitation
- The Swiss Humanitarian Aid Unit (SHA) is the operational arm of Swiss Humanitarian Aid. It has a budget of 26 million Swiss Francs per year. The best known form of SHA Intervention are Rapid Response missions, which happen most often after natural disasters. Next to these emergency missions are project and programs directly implemented by SHA (the Direct Actions). SHA experts can second UN Partner agencies in protracted and complex crises. SHA is composed of 11 experts groups. The WASH expert group has its own strategy “Concept SHA Expert Group 2017 – 2020 Water, Sanitation and Hygiene WASH. As of end of 2016, the EG staff structure was composed of 90 active members and 21 Reserve members. 41% were available only for short term missions and 59% experts for missions longer than 2-3 weeks. The working group is composed of a relatively large range of expertise, balanced between different components of WASH. WASH is predicted to remain a priority after 2020.

\[\text{Figure 21. Switzerland Total reported funding (inside & outside appeal) in USD million (Source: FTS)}\]

\[\text{Figure 22. Switzerland Fund distribution per sector in percentage (Source FTS)}\]

\(^84\) Swiss Federal Council, five framework credits 2017-2020 (online)
ANALYSIS OF THE CAPACITY OF THE WASH SECTOR