



**SOLIDARITÉS
INTERNATIONAL**

A KEY PLAYER IN THE FIGHT
FOR WATER SINCE 1980

7th edition MARCH 2021

WITH THE PARTICIPATION OF GILLES COLLARD | MAMADOU DIA
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AND THE SOLIDARITÉS INTERNATIONAL'S TEAMS

2021 WATER, SANITATION AND HYGIENE BAROMETER

WATER AGAINST EPIDEMICS

**INVENTORY OF
ACCESS TO A VITAL
RESOURCE**

**CHALLENGES
&
SOLUTIONS**

MAKING DAKAR THE FORUM FOR CONCRETE RESPONSES

At this time next year, we will be in Dakar for the 9th World Water Forum (WWF). This edition, devoted to water security, has 4 priorities: access to water and sanitation, cooperation, rural development, and means and tools. The 17 Sustainable Development Goals (SDGs) will be at the centre of discussions, among them Goal 6: access to water and sanitation for all by 2030—and that includes populations of countries in crisis.

A lot is at stake, as this also involves safeguarding water against skyrocketing consumption, a variety of pollutants, the impact of global warming, growing water scarcity and the consequences of Covid-19.

The numbers are telling: 25% of the global population is threatened by rising water stress; 80% of wastewater in developing countries is released into the environment untreated; millions of human beings are dying of diseases contracted from unsafe water; 29% of the global population lacks access to safe drinking water and 55% to sanitation!

The Dakar Forum has pledged to be the WWF of concrete responses. Now it must follow through on that pledge. Even though the Forum is a global event, it must prioritize Africa, the world's poorest continent—especially its most fragile countries, including the Sahel region.

The first Forum to be held in sub-Saharan Africa can and must be a mobilizing force. We thus solemnly call upon the President of Senegal, Macky Sall, and the President of the World Water Council, Loïc Fauchon, to drive all efforts towards this goal. SOLIDARITÉS INTERNATIONAL will actively do its part alongside fellow participants.

Because it is clear that we are not on track to achieve universal access to water and sanitation in 10 years. And that is why we need to pick up the pace and broaden the scope of our actions.

The SDGs represent a remarkable mechanism for human progress. The Dakar Forum must rally us around these goals while also paving the way to the UN Water Action Decade conference in March 2023, which should finally give us a political tool for managing and tracking progress.



By **ALAIN BOINET**,
FOUNDER OF SOLIDARITÉS INTERNATIONAL



By **KEVIN GOLDBERG**,
CHIEF EXECUTIVE OFFICER OF SOLIDARITÉS INTERNATIONAL



2021 WATER, SANITATION AND HYGIENE
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SOLIDARITÉS INTERNATIONAL

Gaining access and providing emergency assistance to those affected by armed conflicts, natural disasters and epidemics, followed by early recovery assistance, has been the defining commitment of the humanitarian NGO SOLIDARITÉS INTERNATIONAL for 40 years. Access to Water, Sanitation and Hygiene is the focus of our teams' expertise and actions in the field. Currently present in some twenty countries, they provide vital humanitarian aid to more than 4.5 million people, solely on the basis of their needs, respecting their dignity, and without judging or taking sides.

[SOLIDARITES.ORG](https://www.solidarites.org)

THE SOLIDARITÉS INTERNATIONAL WATER AGENDA

Every year on March 22nd, World Water Day, SOLIDARITÉS INTERNATIONAL campaigns against the devastating consequences of unsafe drinking water, a leading cause of mortality worldwide. That is why, this year, we are publishing the 7th issue of the Water, Sanitation and Hygiene Barometer internationally. With this 7th issue, SOLIDARITÉS INTERNATIONAL also aims to alert public opinion and spur decision-makers into action to ensure a successful 9th World Water Forum. The event, to be held in Dakar in March 2022 and at which we will be active participants, must drive us towards achieving Goal 6 of the 2030 SDGs: universal access to clean water and sanitation worldwide. SOLIDARITÉS INTERNATIONAL is a member of the French Water Partnership (FWP) and Coalition Eau. In 2016, we took part in Marrakesh COP22 on the urgent issue of water in the Sahel and attended the 8th World Water Forum in Brasilia in 2018. In France, we work with the Ministry of Europe and of Foreign Affairs and French water stakeholders. Abroad, we work with the European Commission, United Nations agencies and the WASH Cluster (UNICEF), of which we are an active member.

WATER & HEALTH

More than one year on, as the Covid-19 pandemic continues to disrupt the world, SOLIDARITÉS INTERNATIONALE takes stock of the current state of access to drinking water, sanitation and hygiene services as well as the ongoing efforts to fight epidemics worldwide. Our findings are alarming: until everyone has safe, sustainable access to drinking water—including during crisis situations and above all in the Sahel region—there can be no significant improvements to public health.

WATER & HEALTH: TIME TO LEAP INTO ACTION!

By **ALAIN BOINET**,
FOUNDER OF SOLIDARITÉS INTERNATIONALE
and **ANTOINE PEIGNEY**,
CHAIRMAN OF SOLIDARITÉS INTERNATIONALE

Water and health experts consult one another all too rarely. This despite the fact that waterborne diseases contracted from unsafe drinking water kill 2.6 million human beings each year! These diseases are well known: cholera, diarrhea, typhoid fever, hepatitis A, bilharzia, polio, etc.

Unsafe drinking water is a major cause of mortality and, as such, it is a humanitarian emergency—particularly in the poorest countries where populations are beset by conflicts and natural disasters.

Water and health constitute two of the main priorities of the UN's 2030 Agenda for Sustainable Development and its 17 Goals (SDGs). Goal 6 seeks to achieve universal access to drinking water and sanitation in 10 years.

Although progress has been made, the official figures show we still have a long way to go (see pp. 6-7 of our Barometer). As it stands, 29% of the global population lacks access to drinking water and 55% to sanitation.

Likewise, 1.4 billion people lack access to sanitary facilities equipped with water and soap, and 3 billion are still unable to wash their hands at home. Moreover, 80% of the world's wastewater is released into the environment untreated.

Nearly 1 in 4 health centres worldwide lacks access to drinking water. 1 in 10 lacks access to sanitation services. And the situation is far worse in the 47 least-developed countries, where 1 in 2 health centres lacks drinking water and 3 in 5 lack sanitation.

As of 2019, a mere 30% of schools worldwide were equipped to provide pupils with safe drinking water.

We need to act now: unsafe drinking water doesn't just kill; it also stifles development.

And we need to act on two fronts simultaneously: 1 – delivering humanitarian and development assistance to vulnerable populations, and 2 – lobbying institutions to ensure that policies get enacted and critical resources mobilized.

We need to pick up the pace and seek out new tools if we are to achieve universal access to drinking water, sanitation and hygiene, as per the unanimous commitment made by 195 states at the UN in 2015.

Notes from the field

WATER ACCESS: A CRUCIAL ISSUE IN THE SAHEL

By **SONIA RAHAL**,
DAKAR OFFICE,
SOLIDARITÉS INTERNATIONALE

Some 24 million people in the Sahel are in need of humanitarian relief. Amidst an unprecedented crisis combining conflicts, persistent population movements and structural vulnerabilities, access to water is becoming more and more of a challenge. A rare commodity as it is, water has become particularly scarce in areas cut off by prolonged crises. In Burkina Faso, overtaxed water infrastructures cannot cover the needs of both host and displaced populations. In Niger, over half of people living in rural areas lack access to drinking water and 70% of the population practices open defecation. In Chad, a mere 43% of the population has access to drinking water and 10% to sanitation.

The absence of clean drinking water forces populations to consume unsafe water, heightening their risk of contracting waterborne diseases like cholera, which is endemic in several areas. This, in turn, exacerbates nutritional deficiencies among the most vulnerable populations, as over half of malnutrition cases are linked to waterborne diseases. A lack of access to water also generates inequalities: in rural areas, for example, the task of fetching water mainly falls to women and children. And open defecation and non-segregated latrines heighten the risk of gender-based violence. Finally, tensions between farmers and breeders over water points feed into intercommunal conflicts, posing a threat to stability and social cohesion.

Access to drinking water, sanitation and good hygiene practices is thus crucial to the health, the development and, indeed, the human rights of these populations.

2.6 MILLION PEOPLE DIE EVERY YEAR DUE TO WATER-RELATED DISEASES AND UNSANITARY LIVING CONDITIONS

ACCESS TO WATER & SANITATION



2.2 billion people, or 29% of the world population, do not have access to safely managed domestic drinking water supply services.

4.2 billion people, or 55% of the world population, do not have access to safely managed sanitation services.

673 million people, or 8.92% of the world population, defecate out in the open.

Source: WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation



A LACK OF WATER: DEADLIER THAN WAR

Children under the age of 5 living in war-torn countries are on average 20 times more likely to die of a diarrhoeal disease linked to a lack of clean water, sanitation and hygiene than as a result of war-related violence. (In 16 countries affected by conflict between 2014 and 2016).

Source: WHO, UNICEF, Water Under Fire, 2019



FUNDING IS DOWN AMIDST THE COVID-19 CRISIS

As the Covid-19 epidemic spread throughout the world in 2020, funding commitments for water and sanitation dropped by 26.3%

(to 2.56 billion euros) compared to the same period in 2019 (3.46 billion euros). (In the first seven months of 2020).

Source: Development Initiatives



WATER & HEALTH

INADEQUATE ACCESS TO WATER AND HANDWASHING...

1 in 2 health facilities

in the world's 47 least-developed countries lacks water supply services, exposing medical staff and patients to a higher risk of Covid-19 infection.

Source: WHO/UNICEF, State of the World's Sanitation, 2020

1 in 3 health facilities

worldwide is not equipped to ensure hand hygiene in treatment wards.

Source: WHO/UNICEF, State of the World's Sanitation, 2020

A mere 30% of schools

worldwide were equipped to provide safe drinking water in 2019.

Source: WHO/UNICEF, Progress on drinking water, sanitation and hygiene in schools: special focus on COVID-19, 2020

A mere 60% of the global population

has the means to wash their hands with soap and water at home.

Source: UN, The Sustainable Development Goals Report, 2020

...A VECTOR OF MORTALITY AND UNDERNUTRITION

842,000 people die every year from diarrhoea due to inadequate sanitation.

297,000 children under the age of 5 die every year from diarrhoea

because they have consumed unsafe water or due to a lack of sanitation services or inadequate hand hygiene.

50% of cases of child undernutrition

are due to recurrent diarrhoea and intestinal infections caused by unsafe drinking water, inadequate sanitation and lack of hygiene.

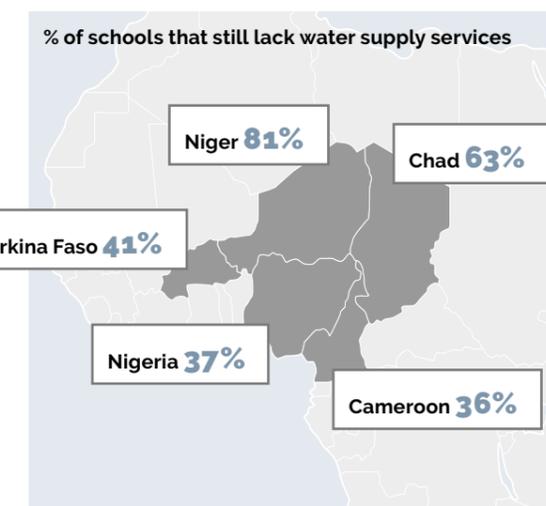
Source: WHO

CRISIS IN THE SAHEL

In sub-Saharan Africa, 135 million people—twice as many as in 2000—have limited access to water and sanitation, and in 71% of households, water fetching falls to women and girls (leading them to miss school and hindering their access to employment).

Source: WHO/UNICEF, JMP 2020

NON-EXISTENT WATER ACCESS IN SCHOOLS



Source: WHO/UNICEF, JMP 2020



CLIMATE CHANGE

99% of all natural hazards are water-related.

Their frequency and intensity are increasing.

Source: UN WATER

4 billion people,

or two-thirds of the global population, are affected by severe water shortages for at least 1 month of the year, mainly due to drought.

Source: Science Advances

500 million people

are affected by severe water shortages all year round.

Source: Science Advances

Around one-quarter of the global population, in 17 countries, is currently experiencing acute water stress.

Source: World Resources Institute

SOLIDARITÉS INTERNATIONAL'S 2020-2025 WASH STRATEGY

By Aude Lazzarini and Baptiste Lecuyot, SOLIDARITÉS INTERNATIONAL

In 2020, SOLIDARITÉS INTERNATIONAL adopted a 5-year Water, Sanitation, and Hygiene (WASH) strategy, thus reaffirming its commitment to provide appropriate, qualitative, high-impact humanitarian responses that focus on the health, dignity and well-being of vulnerable, crisis-affected populations.

SOLIDARITÉS INTERNATIONAL'S 2020-2025 WASH strategy is aligned with the global Sustainable Development Goals (SDGs) and aims to achieve SDG 3 (health and well-being) and SDG 6 (universal access to drinking water and sanitation) in degraded contexts by 2030. This sector-specific strategy focuses on 3 priority areas, in which SOLIDARITÉS INTERNATIONAL aims to improve its practices, develop its expertise and innovations, promote knowledge-sharing within the sector and voice the needs of affected populations.

1 STEPPING UP THE FIGHT AGAINST EPIDEMICS

This commitment involves strengthening interdisciplinary coordination and increasing the number of joint actions and initiatives between the WASH and Health sectors. This includes consolidating local epidemiological surveillance systems (including community and environmental surveillance programs), improving the predictability of epidemics and the efficiency of rapid responses, and strengthening drinking water, sanitation and hygiene services in healthcare facilities and urban "hotspots" where endemic diseases prevail.

2 ENHANCING THE QUALITY OF WASH PROGRAMS DURING THE SHOCK ABSORPTION PHASE

During this initial emergency response phase, the objective is to give due consideration to the "do no harm" principle, by systematically: (i) implementing measures to protect the affected populations from any form of violence or violation of their well-being and dignity, (ii) containing health risks as much as possible and (iii) minimizing negative environmental impacts.

Regarding the latter, one of SOLIDARITÉS INTERNATIONAL'S main priorities over the coming period will be to improve the management and preservation of water resources. For example, the objective is to set up integrated monitoring and better coordination of water resource usage, right from the initial phases of intervention. When this is not done, it can lead to overexploitation of groundwater resources, as has been observed in the Borno region (Nigeria). When the main groundwater reserve was used to meet high demand for water due to the massive influx of displaced persons, its static level fell significantly. Due to lack of monitoring and measurements of groundwater usage, field workers were unable to react in time before it reached a critical level.

Sanitation presents other challenges. Humanitarian activities tend to concentrate on building latrines—to contain health risks by collecting and storing faeces on site—but "overlook" the next stages in the process: emptying, transporting and treating sludge. These tasks are generally carried out by the informal private sector,

which often has neither the expertise nor the resources to address the negative impacts of its actions on the environment. It is true that effective treatment systems are expensive and difficult to install. Designing, scaling and operating them requires expertise, studies and training. The question is therefore: how can we quickly and effectively carry out activities that have a completely different timescale from emergency programs, and how can this be done in degraded contexts?

3 STRENGTHENING PUBLIC WASH SERVICES IN DEGRADED CONTEXTS

This involves capacity building and technical support for local authorities, to help them maintain and/or strengthen essential public WASH services in deteriorating contexts or areas affected by chronic crises, where these services are under increased pressure due to a massive influx of displaced persons or a disease outbreak. In these contexts, integrated water resources management is also crucial. Best practices must be systematically implemented to ensure that infrastructure performs as efficiently as possible, and that water resources are used rationally to prevent overexploitation, all with a view to the area's future recovery and to reduce the impacts of climate change.

YOU CAN CONSULT SOLIDARITÉS INTERNATIONAL'S 2020-2025 WASH STRATEGY HERE:

BIT.LY/2ZMF8GA

DELIVERING WASH AT SCALE, ANYWHERE AND AT ANY TIME

By the Cluster Advocacy and Support Team (CAST), GLOBAL WASH CLUSTER

WATER UNDER FIRE...

In 2019, the number of people receiving humanitarian assistance worldwide reached an all-time high, with the Water¹, Sanitation and Hygiene (WASH) sector at the core of the response to emergencies. Yet WASH responses all too often fail to meet defined humanitarian or sectoral standards owing to a lack of capacity, preparedness and funding. These shortcomings result in services and assistance that are not fully accountable and do not adequately address the priority needs and expectations of the population in question. Now is the time to accelerate action to enhance the capacity of the WASH sector² to provide high-

quality and accountable responses, rooted in preparedness and resilience across the continuum/contiguum of the humanitarian-development nexus.

¹ *Water under Fire, UNICEF, 2019*
www.unicef.org/media/51286/file/Water-under-fire-2019-eng.pdf
² *Water Under Fire Volume 2, Strengthening sector capacity for a predictable, quality humanitarian response, UNICEF, 2020*
www.unicef.org/reports/strengthening-sector-capacity-for-quality-humanitarian-response-2020

TOWARDS A SECTORAL SOLUTION: WASH SECTOR ROADMAP 2020-2025



Vision, axes and pillars to deliver humanitarian WASH at scale, anywhere and any time

Through strengthened collective commitments and strategic engagement by all WASH sector stakeholders, the implementation of the Road Map 2020-2025 will roll out innovative approaches to save lives, achieve better public and environmental health outcomes and build synergies between the responses to acute and complex emergencies, humanitarian crises and long-term development.

This will be achieved through three strategic axes and three prerequisite pillars that integrate and mainstream the core principles of humanitarian assistance (see Vision diagram, left).

Partners within the sector have defined seventeen strategic initiatives to implement the Road Map 2020-2025. These initiatives represent a total cost of USD 15.5 million over 5 years.

The roadmap was developed by the Cluster Advocacy and Support Team (CAST) of the Global WASH Cluster (GWC), with input and support from the Cluster's partners and in collaboration with the WASH Inter-agency Group: Action contre la Faim (ACF), International Committee of the Red Cross (ICRC), International Federation of Red Cross and Red Crescent Societies (IFRC), International Organization for Migration (IOM), Oxfam GB, Médecins Sans Frontières (MSF), Norwegian Church Aid (NCA), RedR UK, Save the Children UK (SCUK), Solidarités International (SI), UN High Commissioner for Refugees (UNHCR), United Nations Children's Fund (UNICEF) and Welthungerhilfe (WHH). GWC CAST wishes to thank the WASH partners who contributed to this strategy for their efforts.

FULL VERSION OF THE GLOBAL WASH CLUSTER

ROADMAP 2020-2025:

WASHCLUSTER.NET/SITES/DEFAULT/FILES/INLINE-FILES/

ROADMAP_2020-2025_AT_A_GLANCE.PDF



WILL COLLECTIVE INEFFICIENCY BE OVER IN MARCH 2023?

By **GÉRARD PAYEN**, FORMER WATER ADVISOR
TO THE UNITED NATIONS SECRETARY GENERAL
AND VICE PRESIDENT OF THE FRENCH WATER
PARTNERSHIP AND ASTEE

In March 2023, the United Nations is due to hold a “rare” conference on water. Gérard Payen urges the international community to overcome its inertia and make this summit a historic event, during which important political decisions will be taken and an annual agenda will be set to achieve Goal 6 of the 2030 SDGs.

Governments discuss freshwater at such a large number of international events that their work is now fragmented, scattered across disparate events, with no guiding principles and very little coordination. This results in confusion for the governments themselves, as well as for most other stakeholders in the international community. UN-Water does its best to

ensure technical coordination, but the political coordination of various water-related activities remains to be defined. All these events are nonetheless useful forums for developing knowledge and preparing future decisions. For example, the World Water Forums in Mexico (2006) and Istanbul (2009) paved the way for the human right to safe drinking water to be recognized in 2010, while the Marseille

Forum (2012) and the Budapest Summit (2013) led to the adoption of a specific Sustainable Development Goal (SDG) on water in 2015.

In March 2023, the United Nations will hold an International Water Conference. It will be jointly presided by Tajikistan and the Netherlands, and will be attended by all governments. This will be a major event since only UN summits can give rise to global political decisions that countries consider binding and that benefit from long-term operational monitoring. The many intergovernmental meetings held in parallel to UN efforts may yield useful conclusions, but in the absence of institutional follow-up mechanisms, these findings generally do not progress very far. Within the United Nations, most of the meetings devoted to water are organized by UN agencies or Secretariats for international treaties that specialize in a particular field, only covering certain water issues. An international conference on all freshwater issues (all types of water as well as sanitation) is therefore a very rare event at the UN. Water issues are multiplying and becoming increasingly interrelated with every passing year. They underpin the vast majority of SDGs, making the 2023 conference a very rare opportunity to take useful collective decisions to improve global organization on water issues.

THE SDGS: A COHERENT VISION

In 2015, a revolution took place. The adoption of the SDGs was the first time that governments had taken all the major water issues into consideration within a global program. Prior to that, collective goals only existed for drinking water and access to toilets. In 2015, this very patchy perspective was filled out with supplementary targets for water resources management, pollution and wastewater management, water ecosystems, flooding, public participation, water in schools, adaptation to climate change, urban planning, etc. In

short, a complete vision on water issues was born. Twenty SDG targets are directly related to water. That’s great news! But unfortunately, nothing much has changed since 2015 in intergovernmental circles. It is as if the silos of the past have taken over again. In 2018, at the UN High-level Political Forum on Sustainable Development (HLPF), governments discussed water for three hours but took no new decisions. Worse still, during their first SDG Summit in October 2019, they boasted about their progress on access to safe drinking water, in stark contrast with global statistics predicting that the 2030 target for universal access to drinking water will not be reached until the 23rd century at the pace of progress resulting from current policies. Since 2015, no intergovernmental work has been done to acknowledge and rectify the insufficient progress towards water-related SDG targets. This lack of activity on all water issues stems directly from the fact that there is no specific UN political forum for water. Unlike the majority of SDG key topics, which each have their own intergovernmental platform with regular political meetings, water is not so fortunate and, politically speaking, has been left behind. There is a dire need for collective coherence and efficiency, but this is very seldom discussed since many institutional stakeholders, countries and UN agencies see more interest in maintaining the status quo.

A UN POLITICAL SUMMIT ON WATER IS MUCH TOO RARE AN EVENT

Some say that the 2023 UN Water Conference will be the first since the Mar-del-Plata conference in 1977. This shows very little regard for the UN Sustainable Development Commission meeting in 2005, which brought together all the world’s governments for two weeks and resulted in a nine-page UN resolution on integrated water resources management, ecosystem preservation, drinking water and sanitation, including

the treatment and reuse of wastewater. However, since 2005, the only significant UN resolutions on water have been the inception of the International Year of Sanitation (2008), the recognition of the human right to safe drinking water and sanitation (2010) and the adoption of the SDGs (2015).

The 2023 UN Conference will therefore be one of the very rare events where decisions can be taken on all water issues. It will be an opportunity to make intergovernmental work on water more effective, by deciding to organize an annual UN intergovernmental meeting on all water-related SDG targets, as is the case for the other SDG key topics. This would ensure political coherence between the many disparate existing efforts and enable the organization of efforts to achieve SDG 6 and all the global water-related goals. A decision of this kind cannot be taken in 2023 without active preparation and sufficient anticipation. This will be one of the main issues at stake during the 9th World Water Forum that will take place in Dakar in 2022.

Will the 2023 Conference take the decision to institute regular UN political meetings on all water-related SDG targets? If so, the conference will be quite historic. But if we miss this opportunity, the international water community will only have itself to blame for remaining collectively inefficient, for the lack of political attention paid to water and for the slow progress towards water-related SDG targets.



FIGHTING EPIDEMICS

In response to the Covid-19 pandemic, there have been a plethora of public health messages about protective measures, and especially about handwashing. But the simple act of washing your hands is far from straightforward throughout the world. In many countries, especially in Africa, access to domestic water supplies is inadequate or even inexistent. In such situations, how can you effectively protect yourself from epidemics, or more generally from water-related diseases? The lessons learned from fighting cholera in Haiti and in the Lake Chad basin, as well as from combating Ebola in the Democratic Republic of Congo, show that nothing is possible unless coordinated, inclusive, long-term responses are implemented.

COVID-19 PANDEMIC: RAPIDLY ADAPTING RESPONSE STRATEGIES TO AN UNPRECEDENTED CRISIS

By SOPHIE BONNET, PUBLIC HEALTH TECHNICAL
ADVISOR FOR SOLIDARITÉS INTERNATIONALE

Over a year after Covid-19 started to spread throughout the world, SOLIDARITÉS INTERNATIONALE takes stock of the pandemic's impact and the humanitarian responses implemented in several countries lacking the healthcare capacities to tackle this unprecedented crisis.

With over 112 million confirmed cases at the time of writing*, the Covid-19 pandemic has placed enormous strain on the world's healthcare systems. It has also widened the social divide and exacerbated the most vulnerable communities' living conditions, especially in conflict zones. In response to this unprecedented crisis, SOLIDARITÉS INTERNATIONALE has remained true to its mission as a front-line humanitarian actor, adapting its field activities (Water, Sanitation and Hygiene, Food Security and Livelihoods, etc.) to best fit the needs of the populations that we assist. With over 153,000 registered cases, Nigeria is one of the worst affected countries in Africa. SOLIDARITÉS INTERNATIONALE opened a humanitarian mission in Borno State in 2016, where we carry out cholera prevention and response activities, among other programs. Drawing on our experience as regional Cholera Task Force coordinator over the last few years, our NGO proposed appropriate prevention and response activities to fight Covid-19. Our teams thus obtained funding to create special hygiene kits, to carry out awareness-raising activities (protective measures, social distancing, wearing a mask, etc.) and to improve sanitation and access to drinking water.

In Cameroon, where we have been working since 2014, 33,749 confirmed cases of Covid-19 have been recorded. To fight the epidemic, SOLIDARITÉS INTERNATIONALE has joined forces with Action contre la Faim and the Cameroonian Public Health Ministry to implement a project funded by the Agence Française de Développement (AFD). Our teams are working in quarantine/isolation centres, and are concentrating their efforts on installing handwashing stations, managing waste, and infection control and prevention. SOLIDARITÉS INTERNATIONALE is also active in Central African refugee camps, where it is carrying out mass awareness-raising activities in collaboration with traditional leaders and community focal points.

In South-East Asia, Bangladesh has registered over 544,000 confirmed cases of Covid-19. SOLIDARITÉS INTERNATIONALE has been working in Rohingya refugee

camp and host communities in the south-east of the country since 2010. Despite a rising incidence rate and a very strict lockdown that came into force in March 2020, limiting access to communities, our NGO managed to continue its essential activities by adapting them to Covid-19 (distribution of hygiene kits, disinfection of sanitary facilities, etc.). However, some activities that were deemed non-essential (building and rehabilitating latrines or water networks) were put on hold during the lockdown. Food security activities continued, in the form of pre-monsoon seed distribution. In Myanmar, where there are around 141,000 confirmed cases,

we mainly focused our activities on the Rakhine and Kachin States, where the majority of displaced persons are living. This included water supply and treatment, distribution of Covid-19 kits, construction of handwashing stations and awareness-raising within communities. These activities are just a few examples of the many actions taken. Our field teams' efficient work, together with the expertise provided by SOLIDARITÉS INTERNATIONALE and other actors (UN agencies, local and international NGOs, health ministries, institutional donors, civil society) enabled the implementation of a large-scale response. Mobilizing human, financial and logistical resources on such a large scale presented challenges, but we faced these challenges together. And there is still much to be done: it is crucial to maintain the current level of aid, so that local authorities can build up their expertise to fight future epidemics and pandemics, and also to develop clear operational strategies for the post-pandemic period.

**IT IS CRUCIAL
TO MAINTAIN
THE CURRENT LEVEL
OF AID, SO THAT
LOCAL AUTHORITIES
CAN BUILD UP THEIR
EXPERTISE TO FIGHT
FUTURE EPIDEMICS.**

* Dashboard by Johns Hopkins University, 25th February 2021
coronavirus.jhu.edu/map.html

CHOLERA IN HAITI AND COVID-19 IN PARIS:

By **RENAUD PIARROUX**,
EPIDEMIOLOGIST **NOT SO DISSIMILAR AFTER ALL!**

Renaud Piarroux is head of the parasitology and mycology department at the Pitié-Salpêtrière hospital in Paris, and professor at the Sorbonne University Faculty of Medicine. An internationally recognized specialist in cholera epidemics, he is actively involved in fighting Covid-19* and has agreed to give SOLIDARITÉS INTERNATIONALE his analysis of the current health crisis. As he sees it, lessons learned from fighting cholera in Haiti can serve us in the ongoing battle against Covid-19 in France.

It may seem surprising to compare the cholera epidemic in Haiti to the outbreak of Covid-19 in Paris. At first, these two situations seem to have nothing at all in common: the causes of infection (bacterium versus virus), clinical symptoms and treatments are different, as are the ways these two diseases spread, except for the common denominator that they are transmitted via contaminated hands. Above all, the context is completely different. On the one hand, a disease associated with underdevelopment, which broke out in a context of political, economic and social collapse; on the other, an epidemic affecting a rich European city where the social context is indeed tense, but not enough to threaten overall social stability. And yet, despite these intrinsic differences, there are many similarities between the two catastrophes.

THE HAITIAN CONTROVERSY

The cholera epidemic broke out in Haiti in October 2010, while the country was still reeling from the effects of a particularly deadly earthquake (between 100,000 and 300,000 lives lost) that had hit eight months earlier. In the space of a few days, cholera cases exploded along the length of Haiti's largest river, the Artibonite. Although epidemiological investigations quickly identified the disease's point of origin right next to a camp of UN peacekeepers freshly arrived from Nepal, where there was an ongoing cholera epidemic, experts from the Pan American Health Organization (PAHO) and various UN agencies immediately ruled out the theory that these soldiers had imported the dangerous microbe. American academics then rushed to second this conclusion, claiming that the epidemic was linked to global warming and the emergence of the offending bacteria in the brackish waters of the Artibonite delta. However, as time

went by, this hypothesis was refuted by epidemiological studies and by comparing the genomes of the vibrio cholerae strains identified during the Nepalese and Haitian epidemics. As scientific evidence of the UN forces' responsibility continued to mount, rendering the climate hypothesis more and more implausible, the arguments put forward by PAHO experts and supported by academics grew weaker and weaker, as did the official UN position denying any responsibility for this catastrophe. It took another six years before Ban Ki-moon, then UN Secretary-General, implicitly acknowledged the organization's responsibility and offered his apologies to the Haitian population.

This controversy over the origin of the epidemic, coupled with many Haitians' distrust of both the United Nations and their own successive governments, meant that a trusting environment could not be established, thus impeding the implementation of cholera control activities. With no political or scientific consensus on which strategy to pursue, it took years to adequately organize and implement action to fight cholera, especially the intervention of mobile teams every time a new case was detected. As a result, the epidemic continued year after year, as successive outbreaks alternated with relatively calm periods. It was only at the end of 2016 that this struggle finally took a turn for the better, when Ban Ki-moon's apology put fighting cholera back on the international community's political agenda. Two years later, in February 2019, the last cholera outbreak was extinguished near the Artibonite delta. Since then, not a single case of cholera has been diagnosed in Haiti.

WITH NO POLITICAL OR SCIENTIFIC CONSENSUS, IT TOOK YEARS TO ORGANIZE ACTION TO FIGHT CHOLERA.

THE NEED TO BUILD TRUST AND INVOLVE POPULATIONS

A deadly disease characterized by several successive waves of infection, against a backdrop of public distrust for political authorities; a scientific controversy over the origins and the future of the epidemic, as well as on how to put an end to it; experts who have lost credibility because they are suspected of hiding the truth and not seeking to inform objectively; and lastly, great difficulties in establishing a coherent strategy and setting up an effective response. It is clear that the health and social crisis caused by Covid-19 in France has many similarities with the cholera epidemic in Haiti. In this respect, two points merit emphasis since they will determine the success or failure of the Covid-19 response in the coming months, at least until the population has been vaccinated.

Firstly, it is absolutely essential to establish a trusting relationship between the general public and the scientific and political authorities that are involved in designing and implementing activities to fight the epidemic. Clearly, in France as in Haiti, this relationship was very quickly damaged by the inconsistent and sometimes even false declarations made by certain experts and politicians over the course of the epidemic. Faced with a case of health misconduct that, in one situation, caused an epidemic (introduction of cholera in Haiti) and, in the other, compromised the response to an epidemic (lack of preparation and protective equipment to tackle Covid-19 in France), there was a great temptation to hide the truth and look to pseudoscientific explanations as a means of skirting the issue. In Haiti, the focus turned to the environmental context, poverty within the country and the population's failure to observe personal hygiene measures. In France, the general public was told that they did not need masks or any other form of protection—not even fabric masks that could have been produced very quickly. It seems that in politics, it is never advisable to acknowledge your mistakes. This allows you to maintain your advantage over the enemy. However, let us note that when the enemy is a virus, this attitude has a phenomenal cost, measured in human lives. Moreover, since these errors cannot be concealed indefinitely, disguising them leads to controversy, which in turn fuels conspiracy theories and undermines trust among a growing proportion of the population. This means that instructions to prevent the epidemic spreading are not always followed, and the situation gets worse. The epidemic takes hold.

The second point concerns the population's central role in controlling epidemics. When fighting cholera or Covid-19, it is people themselves who decide whether or not to observe good hygiene and protective measures.

They also decide whether or not to seek medical attention, especially when they have moderate symptoms of the disease. Finally, they are the ones that choose whether or not to open their doors to epidemic response teams. And, where Covid-19 is concerned, these same people are asked to provide the names of their contacts, which is an essential step to break the chains of transmission surrounding each confirmed case.

WHEN FIGHTING CHOLERA OR COVID-19, IT IS PEOPLE THEMSELVES WHO DECIDE WHETHER OR NOT TO OBSERVE GOOD HYGIENE AND PROTECTIVE MEASURES.

MOBILE TEAMS: A VALUABLE ASSET

In Haiti, mobile teams gradually gained the population's trust by travelling throughout the country and providing everyone with the materials they needed to protect themselves against cholera. Our supervisory rounds enabled us to check that people understood and were observing hygiene guidelines, insofar as conditions permitted. The mobile teams acquired specific skills and earned a good reputation, which increased the impact of their operations. In France, the mobile team strategy to visit patients and their families in their homes is still in its very early stages. Initially deemed too complex to apply, it has only been implemented in Paris (COVISAN), Cayenne (YANACOV) and Marseille (CORHESAN). For the moment, it only covers limited areas within these three cities. And yet these teams are a valuable asset to help the population get organized to fight the epidemic, especially as people are weary of the crisis and mistrust the government, whom they consider detached from reality.

Cholera in Haiti and Covid-19 in Paris are not so dissimilar after all. There is even a direct link between the mobile team strategies in Haiti and in Paris: the first COVISAN hub, which was launched last April at the Pitié-Salpêtrière Hospital in Paris, is based on the Haitian cholera response model and was set up with the assistance of a former Country Manager at SOLIDARITÉS INTERNATIONALE.

* Renaud Piarroux has written two books: *Choléra. Haïti 2010-2018, histoire d'un désastre* (2019) and *La vague. L'épidémie vue du terrain* (2020).

CROSS-BORDER CHOLERA EPIDEMICS IN THE LAKE CHAD BASIN

By **ALLASSANE TRAORÉ**,
WATER, SANITATION AND HYGIENE ADVISOR
AT SOLIDARITÉS INTERNATIONALE (DAKAR OFFICE)

The only successful way to fight cholera in the Lake Chad basin is stronger long-term cooperation between the various countries in the region.

The first cholera epidemics in the Lake Chad basin broke out in 1971, when the seventh pandemic extended into West Africa. 1991 marked a major turning point as annual epidemics became larger and more frequent, amounting to 80,600 cases and 9,800¹ deaths in the four Chad basin countries: Niger, Nigeria, Chad and Cameroon. Geographical, anthropological and epidemiological studies conducted over several years show the cross-border spread and development of epidemics in the region.

In 2010, Niger, Nigeria, Chad and Cameroun were affected by one of the worst cholera epidemics since the disease emerged in West Africa. It resulted in an estimated 58,000 cases and claimed 23,000 lives in these four countries, the majority of which were registered in the basin area. This regional outbreak is the second largest epidemic recorded in the past forty years.

Since 2012, studies have analyzed and documented the contexts where cholera transmission occurs, how epidemics spread and "hotspots", with a view to issuing earlier national and cross-border alerts and improving early response capabilities. Since 2013, factsheets have been prepared on the progression of

epidemics in the basin area; they were updated in 2017 with support from the regional cholera platform and in close collaboration with national and regional actors.

According to data from these factsheets², epidemiological surveillance recorded 37,396 cases and 1,646 deaths in Cameroon between 2010 and 2017 (case fatality rate = 4.4%) as well as 122,239 cases and 3,713 deaths in Nigeria (case fatality rate = 3%). When we compare their epidemiological graphs, we observe that these countries are often affected by cholera at the same time, with an outbreak in one country then spreading to neighbouring countries.

According to cholera platform data, Nigeria and Niger suffered from a relatively serious epidemic in 2018 (29,239 and 3,803 cases respectively), whereas Cameroon recorded 1,017 cases and Chad was spared. Overall, this downward trend continued in 2019, with fewer cases recorded than in 2018, mainly due to the drastic decrease in cases in Nigeria (only 3,513).

According to epidemiological data, the Lake Chad basin remains one of the worst-affected regions in the world in terms of cholera outbreaks. The region's epidemiological profile is alarming, due to the annual occurrence of epidemics and their incidence rates.

Effective, long-term management of cholera issues in the area requires close cooperation between countries and especially between "hotspots": they must issue warnings, exchange information and implement coordinated responses.

To this end, significant progress has been made in cross-border collaboration between the region's countries, thanks to the regional cholera platform's mobilization, technical support and coordination. The platform, which is co-managed by UNICEF and the WHO, has actively contributed to creating a joint, shared framework between Chad basin countries. Several cross-border workshops have been held (the last one in N'Djamena in 2018) to make progress on the major challenge of eradicating cholera. These initiatives have brought national stakeholders together and enabled them to exchange information and alerts. Despite these efforts, many challenges remain, among them formalizing cross-border collaboration at every level within healthcare systems, and improving rapid detection, preparedness, multidisciplinary responses and coordination.

¹ UNICEF August 2011, **WASH and Cholera Epidemiology: an Integrated Evaluation in the Countries of the Lake Chad Basin** humanitarianresponse.info/sites/www.humanitarianresponse.info/files/LakeChadBasinCholeraWashStudy.pdf

² UNICEF/ECHO 2018, **Cholera Factsheet Tchad, Niger, Nigeria et Cameroun** plateforme.cholera.info/index.php/cholera-in-wca/cholera-factsheet

LESSONS LEARNED FROM FIGHTING EBOLA IN DRC

By **JUSTINE MUZIK PIQUEMAL**,
REGIONAL DESK MANAGER,
and **BRIAN MALAPEL**, DRC DEPUTY COUNTRY
MANAGER AT SOLIDARITÉS INTERNATIONALE

The tenth^{*} epidemic of Ebola Virus Disease, which ravaged the Democratic Republic of Congo (DRC) between 2018 and June 2020, claimed a tragic total of 2,277 lives. The only Ebola outbreak to exceed this death toll was the West African epidemic (2013-2016). Let us take another look at the second-worst epidemic to hit sub-Saharan Africa.

SOLIDARITÉS INTERNATIONALE, a humanitarian NGO specializing in Water, Sanitation and Hygiene (WASH), was actively involved in the fight against the West African Ebola Virus Disease (EVD) epidemic in 2014, alongside Médecins du Monde, in an Ebola Treatment Centre in Sierra Leone². Our teams were in charge of WASH management, as well as infection prevention and control protocols. They were also involved in community mobilization, by carrying out prevention campaigns in schools and providing support for health authorities.

A COMPLEX COMBINATION OF CHALLENGES

In the Democratic Republic of Congo, fear and stigma over successive EVD outbreaks have given rise to violence and resistance among the majority of the population. This context makes it even more difficult to establish a secure, appropriate humanitarian response strategy. It hinders the effective implementation of the necessary preventive and diagnostic measures, and hampers community awareness-raising activities to reduce the spread of the epidemic. All this against a backdrop of recurrent armed clashes within the country and the resulting population displacements, which accentuate humanitarian needs and increase pressure on inadequate existing WASH facilities (fragile public water services, low access to operational sanitation facilities, inappropriate hygiene practices, etc.), thus creating a breeding ground for the disease to spread within the community.

Faced with this complex environment, our NGO has never once suspended its activities. Instead, we have adapted them to meet the population's needs (distribution of seeds or cash, WASH activities, etc.) in those very areas where the risk of contagion is high, while continuously observing the "do no harm" principle both for our beneficiaries and our teams.

SOLIDARITÉS INTERNATIONALE'S ACTIONS

In September 2019, SOLIDARITÉS INTERNATIONALE launched an Ebola response project in Butembo (Nord-Kivu), funded by UNICEF. The program aims to improve access to drinking water services for the town's population (nearly 90,000 beneficiaries), to increase the knowledge and involvement of institutional stakeholders, and to help prevent and reduce the spread of epidemic diseases, especially the Ebola virus. In addition to building hydraulic infrastructure, water network technicians received technical training and were made aware of the importance of analyzing and treating water.

In order to reduce the impact and prevalence of infectious diseases that could potentially cause epidemics, our NGO is also carrying out a UNICEF-funded WASH project within communities affected by Ebola in Mabalako and Mandima health zones (Nord-Kivu). The goal is to provide the communities located within the project's intervention areas with access to operational WASH facilities, both in primary schools and healthcare

establishments, and to raise awareness among children, families and public sector staff about good WASH practices.

AN INTEGRATED APPROACH IS ESSENTIAL

The 11th Ebola epidemic in DRC, which just came to an end in November 2020, shows that meeting the needs of vulnerable populations, and especially their WASH needs, remains crucial to the prevention and containment of any future diseases with acute epidemic potential. The population must play a central role in response programs, through awareness-raising and community involvement activities, community-based healthcare and WASH activities. To achieve this, it is essential to adopt an integrated, interdisciplinary WASH, Health and Nutrition approach that combines building/rehabilitating infrastructure with training/raising awareness. The implementation of medium/long-term projects aimed at improving hygiene and sanitation conditions within communities and in public spaces, can help eliminate the need for post-emergency interventions.

¹ Ebola Virus Disease epidemics in DRC are dated and located as follows:

- 1st outbreak 1976, Equateur province,
- 2nd outbreak 1977, Equateur,
- 3rd outbreak 1995, Bandundu,
- 4th et 5th outbreak 2007-2008, Kasai,
- 6th outbreak 2012, Oriental province,
- 7th outbreak 2014, Equateur,
- 8th outbreak 2017, Oriental province,
- 9th outbreak 2018, Equateur,
- 10th outbreak 2018, Nord-Kivu and Ituri,
- 11th outbreak 2020, Nord-Kivu.

² SOLIDARITÉS INTERNATIONALE se mobilise contre Ebola en RDC, mai 2018



DISPLACED PERSONS: A SHAMEFUL MILESTONE

By **EMMETT KEARNEY**,
HEAD OF GLOBAL WASH TEAM, UNHCR

Amidst the global maelstrom of the COVID-19 pandemic and its wide-ranging impacts on humanity, we quietly passed a grim milestone in the middle of 2020. There are now over 80 million people forcibly displaced globally. This means that more than 1% of humanity is now displaced due to conflict, persecution, and human rights violations.

This is not the outcome of an inexorable and steady increase in displacement over previous decades. In fact, the number of displaced nearly doubled from around 41 million in 2010 to this shameful number of 80 million today. Prior to this, previous decades had seen relative stability below 40 million.

The reasons for this jump are many but two stand out. The first and most obvious relates to the multiple massive displacements due to conflict. 67% of all global refugees originate from just five countries: Syria (6.6m), Venezuela (3.7m), Afghanistan (2.7m), South Sudan (2.3m), and Myanmar (1m).

The second reason relates to the fact that in the decades prior to 2010, while there were new displacements and some of them quite significant, there were also solutions found for these displacements. Those displaced either returned home, integrated into the hosting communities or were resettled to third countries. Roughly a combined 25 million refugees returned home in the 1990s and 2000s, compared to only 3.9 in the 2010s.

communities, in increased advocacy at all levels and through various streams including the human-rights based approach, in formal integration of displaced people into local service delivery, in faster and better coordinated transitions from emergency to sustainable programming among other areas.

To make progress on inclusion, humanitarian actors will have to forge stronger links and learn to better engage with displaced and host communities, development stakeholders, local actors, and government counterparts. A diverse range of stakeholders have already begun this work in a few contexts; lessons and guidance are being documented but more collective efforts will be required.

REFUGEES AND OTHER DISPLACED PEOPLE MUST BE INCLUDED

The figure of 80 million displaced is an indication that political leaders have been unable to find solutions. For humanitarian actors it should be an indication that the increasingly complex challenges will require us to adapt, to use new thinking and innovation in the way that we approach our work, define our goals and engage our affected populations.

HOW DO WE DO MORE WITH LESS?

As humanitarian WASH actors, what can we expect as we enter a decade in which we expect to see the socio-economic impacts of COVID-19 including impacts on donor budgets and increased effects of climate change that could put further stressors on ongoing conflicts and catalyze further complex emergencies? How do we deal with the increasing numbers of displaced people if humanitarian funding cannot keep pace? How do we link humanitarian and development work to ensure that displaced people are counted as part of work on SDGs and not left further behind? How do we do more with less?

Inclusion is the emerging concept that captures many of the areas of work that need to receive more attention by an expanding range of stakeholders to look for more sustainable solutions wherever possible. Refugees and other displaced people must be included: in SDG monitoring and reporting, in development strategies and related fundraising, in improved feedback and accountability mechanisms targeting both those displaced and their hosting

80 MILLION DISPLACED

26.4 MILLION REFUGEES

45.7 MILLION IDPS

4.2 MILLION ASYLUM SEEKERS

3.6 MILLION VENEZUELAN
DISPLACED ABROAD

ALL FIGURES IN THIS ARTICLE COME FROM THE UNHCR UNHCR MID-YEAR TRENDS 2020 AND GLOBAL TRENDS 2019 REPORTS

EXPLORING THE POTENTIAL OF COMBINING CASH TRANSFERS, MARKET-BASED PROGRAMS AND WASH IN WEST AND CENTRAL AFRICA

By **NATHALIE KLEIN**,
REGIONAL REPRESENTATIVE
and **ABDOULAYE HAMIDOU**,
CAPACITY BUILDING MANAGER, CALP WEST
AND CENTRAL AFRICA

In certain regions affected by crises, and especially in the central Sahel where humanitarian needs are steadily increasing, new methods based on cash transfers and markets can help to improve the impact of Water, Sanitation and Hygiene (WASH) programs.

In early 2020, over 5 million people needed emergency Water, Sanitation and Hygiene (WASH) assistance in the central Sahel. Armed conflicts, population displacements and Covid-19 have exacerbated the existing structural difficulties caused by inadequate infrastructure and services¹. In certain areas, private suppliers have taken over, building water facilities then charging fees to access them. WASH is still one of the most underfunded sectors, and most activities focus on hygiene awareness rather than improving access to water and sanitation. It is therefore relevant to explore new methods to improve the impact of WASH programs.

The Global WASH Cluster is increasingly considering cash transfers (CT) and market-based programming: it has carried out a series of capacity building and awareness-raising activities for actors in the sector, in partnership with CaLP (webinars, training courses attended by regional stakeholders and many other activities²). These efforts will continue, since experimental programs have only just begun in the region.

PROGRAM APPROACHES

Market-based programming refers to all types of programs and interventions within market systems, ranging from

actions that bring immediate relief for people working within these systems to the proactive consolidation of local market platforms or systems³. With regards to WASH, this may entail:

- **Improving supply**
Grants for distributors (to repair or maintain infrastructure), technical support, improving transport.
- **Improving secondary infrastructure and services**
Rehabilitating roads through cash for work projects, facilitating access to loans.
- **Improving market conditions**
In most cases, regulations already exist, however they may be difficult to enforce or inappropriate to emergency situations.
- **Improving access and demand**
through CTs to purchase hygiene supplies, or for water treatment or transport.

Some of these activities will show immediate effects, while others will take more time. It is essential to work with local authorities and the private sector on public water policies in order to regulate prices (encourage graduated prices, reduce taxes) and provide grants for the most vulnerable individuals, while also ensuring that the necessary funds are collected for essential water infrastructure maintenance and investments.

THE IMPACT OF COVID-19

The pandemic has disrupted services in some areas. The market-based approach, as well as CTs for the most vulnerable populations, can help to compensate for loss of income and provide access to basic goods and services including water and hygiene supplies, while supporting market recovery. In this case, CTs must be designed to fit the specific constraints of the epidemic. Situation analyses must therefore be used to select program modalities (cash or vouchers) and distribution mechanisms (online or bank payments, etc.) in order to reduce certain risks (points of contact) and ensure the continuity of aid⁴.

¹ In Burkina Faso, WASH needs have risen by more than 300% from 2019 to 2020 (influx of displaced persons without a sufficient increase in water points and latrines).

² GWC Position Paper on Cash and Markets, 2016; Study on Market-Based Programming for WASH, 2020

³ CaLP/ Markets in Crisis

⁴ According to the GHRP COVID-19 Progress Report, published in November 2020, there has been a 15% increase in CTs from 2019 to 2020. In DRC, the Cash Working Group registered a 40% increase (partially due to improved reporting).

WASH RESPONSES AND PROTECTION: WHERE DO WE STAND?

By **JÉROMINE REGNIER**, PROTECTION AND ACCOUNTABILITY ADVISOR, SOLIDARITÉS INTERNATIONALE

For several years, protection mainstreaming—that is, ensuring that people affected by crises have safe, meaningful, dignified access to humanitarian assistance—has become a central issue in Water, Sanitation and Hygiene (WASH) responses. SOLIDARITÉS INTERNATIONALE takes stock of its progress in this field.

In the 2020 edition of our *Barometer*¹, we stressed the importance of taking into consideration the specific needs of certain groups, for example people with disabilities, and ensuring that women and girls can take part in decision-making processes, thereby safeguarding their access to services and helping to protect them from gender-based violence. These are all important, recurrent issues within WASH responses. Over the last few years, the humanitarian sector has gradually recognized that protection principles form a relevant analytical and response framework. Embracing this mindset, SOLIDARITÉS INTERNATIONALE is actively working on this topic and has made progress on several fronts, both at the organizational and field levels.

ORGANIZATIONAL ADVANCES

A firm, committed "Protection Mainstreaming" policy

In 2020, SOLIDARITÉS INTERNATIONALE formally defined its responsibilities in this regard, and made concrete, operational commitments to mainstream protection principles throughout every phase of its action.

Protection mainstreaming forms the foundation of our 2020-2025 WASH strategy

Protection issues form an integral part of our WASH strategy, and this reflects our organization's commitment to base our analytical and response frameworks on protection mainstreaming.

QAAL: an initiative to make affected populations the focus of humanitarian action again

For one year now, the Global WASH Cluster's Quality Assurance and Accountability Initiative, to which SOLIDARITÉS INTERNATIONALE subscribes, has enabled the development and distribution of new tools to adapt and improve WASH responses to local issues (Read our article on page 27).

INITIATIVES AND BEST PRACTICES IN THE FIELD

Cameroon: evaluating the inherent protection risks of our projects, to provide a meaningful response that mitigates any adverse effects

In 2020, SOLIDARITÉS INTERNATIONALE carried out an assessment to identify the main protection risks for the beneficiaries of one of its projects in Cameroon. This study enabled the NGO to determine which mitigation measures were appropriate and should be incorporated into the activities it carries out, both to uphold the "do no harm" principle and to ensure that the population has meaningful access to the services provided.

Bangladesh: increasing the participation of women to better meet their needs

In Bangladesh, our NGO has developed a standard procedure to encourage women to actively and directly participate

in designing sanitary facilities, following several evaluations showing that women hardly used these facilities. They are now able to take decisions on the layout and items available in sanitary facilities and bathing areas. This joint design approach aims to ensure that WASH services meet the expectations and needs of the women concerned, all while strengthening their role in the decision-making process.

Lebanon: integrated programs to reduce protection risks

The Syrian crisis has had a profound impact on Lebanon, and today the country still hosts the largest number of refugees in proportion to its population. Many of these refugees' needs are not being met. In this context, our teams are working to meet the needs of people with limited access to housing and WASH. SOLIDARITÉS INTERNATIONALE is fully aware that these two sectors also entail inherent protection needs. We have therefore been implementing an integrated Shelter and Wash for Protection approach since 2018, in partnership with specialist organizations, to reduce protection risks relating to housing and WASH.

Despite these efforts, there is still a long way² to go to ensure that people affected by crises have safe, meaningful, dignified access to humanitarian assistance. As stated in our 2020-2025 program strategy, SOLIDARITÉS INTERNATIONALE is committed to carrying out an ambitious action plan in order to provide quality responses.

¹ **DIGNITY, HYGIENE, AND SECURITY** The challenges of protecting access to water and sanitation, Marie-Françoise Sitnam, 2020 *Water Barometer* solidarites.org/wp-content/uploads/2020/03/solidarites_2020_water-hygiene-barometer.pdf

² **Humanitarian Accountability Report 2020**, CHS Alliance chsalliance.org/get-support/resource/har-2020/



CHALLENGES AHEAD

Adapting to increasingly complex and unprecedented crises like Covid-19; giving greater consideration to environmental issues and affected populations; mobilizing around major events such as the 9th World Water Forum: these are just a few of the many challenges facing stakeholders in the Water, Sanitation and Hygiene sector as they work towards achieving Goals 3 (Health and Well-being) and 6 (Water and Sanitation) of the Sustainable Development Goals.

THE GLOBAL PANDEMIC ONE YEAR ON: TIME FOR SOLUTIONS

By **THIERRY BENLAHSEN**,
DIRECTOR OF OPERATIONS, SOLIDARITÉS INTERNATIONALE

The year 2020 was a cruel reminder to the entire world that the risk of an epidemic outbreak is not just a remote concern, but a tangible, dangerous and growing reality for all of us.

Now more than ever, it is critical that all States and institutions acknowledge and prioritize efforts to increase access to basic infrastructures like drinking water, sanitation and hygiene (WASH) as a means of fighting epidemics and improving public health worldwide.

Yet, we are still far from achieving Goals 3 and 6 of the Sustainable Development Goals (2030 SDGs). A recent joint report by the WHO and UNICEF¹ notes that 1 in 4 of the world's health centres lacks access to water supply services, a situation impacting nearly 2 billion human beings; and that, more catastrophic yet, 3 in 5 health centres in the world's 47 least-developed countries lack access to basic sanitation services. Prior to Covid-19, 60% of the population in South Sudan was dependent on unsafe drinking water or surface water. In Yemen, 12.6 million people currently have an acute need for access to safe drinking water. One in two Haitians living in rural areas is still forced to walk over 30 minutes to reach a water point.

How is one supposed to follow proper hygiene measures in these circumstances? How can we keep already-saturated health centres from collapsing under the weight of rising morbidity rates in countries already affected by multiple epidemic risks?

Solutions exist and can be found in the twenty WASH-related targets of the SDGs. However, their active implementation is lagging at a global level, and especially in countries faced with significant humanitarian challenges.

The Dakar World Water Forum, which was postponed to 2022, will hopefully light the way to achieving these goals. All the same, we mustn't lose sight of the fact that fewer than 15% of countries are currently deploying sufficient human and financial resources² to implement their policies and deliver on their commitments surrounding water, sanitation and hygiene. Since 2009, a mere 4% of all global humanitarian funding has been allocated to these areas³.

More than just a logistical challenge, universal access to safe drinking water and sanitation is, for the international community, a question of will.

¹ washdata.org/sites/default/files/2020-11/UNICEF-WHO-state-of-the-worlds-sanitation-2020.pdf

² *Global Analysis and Assessment of Sanitation and Drinking-Water, WHO/UN-Water, GLAAS 2019 Report.*

³ *Financial Tracking Service, OCHA, 2019 snapshot.*

Notes from the field

WATER IS LIFE!

Par **NADJILEM MAYADE**,
COUNTRY DIRECTOR CHAD-CAMEROON,
SOLIDARITÉS INTERNATIONALE

Populations on both the Cameroonian and Chadian shores of the rapidly shrinking Lake Chad have watched their livelihoods dry up over the past several decades. The water shortage has driven some members of the region's vulnerable communities into the ranks of terrorist groups such as Boko Haram, which has been spreading terror in the region for the past several years. On top of that, a devastating cycle of droughts and flooding has ravaged the Sahel in recent decades, leaving entire villages in ruin, their livestock whisked away by the torrents and their meager food reserves swallowed up by floodwaters.

Amane Imani! That's Tuareg (Tamashek) for "Water is life." Our thoughts go out to the Sahelian populations who are desperately struggling for access to water. Water for drinking. Water for their livestock. Water, quite simply, for survival.

These thirsting populations have never heard of the Water, Sanitation and Hygiene (WASH) sector. They just need water. Populations lacking access to water don't know the difference between humanitarian and developmental action. They want water to sustain their health and their livelihoods, to allow them to live with dignity. So, wherever possible, the humanitarian community must make a concerted and organized effort to ensure that no one is forgotten by emergency responses or development projects in the areas they serve.

THE CHALLENGES OF SITUATION ANALYSIS

By **PATRICE CHATAIGNER,**
OKULAR-ANALYTICS

To address priority needs through timely, appropriate and proportionate response, programs need to be based on systematic situation analyses.

The primary function of needs assessment is to inform decision making, allocate resources proportionally and justify humanitarian interventions. Several challenges have been highlighted over the last few years:

- Difficulties in agreeing on a common analysis framework to measure humanitarian needs, leading to siloed approaches between humanitarian sectors and the use of different conceptual models (for instance needs, risk and rights based approaches) to identify unmet needs.
- Growing pressure to use more quantitative and sophisticated measurement models and ways to quantify people in need, to the detriment of good enough approaches to assessment and analysis.
- Excessive attention to the quantity of data collected compared to the quality of the conclusions and analysis derived from available information or the most effective use of already existing information and knowledge.

While challenges clearly exist/persist, some opportunities that have emerged over the last few years are not leveraged enough:

- Humanitarian staff is increasing across organisations. This expert knowledge can be harnessed more systematically and efficiently to deliver insight about geographical areas, affected groups and humanitarian sectors most impacted.
- The increasing availability of secondary data from other sources and the opportunities it offers to triangulate information and reach more quality and credible conclusions.

- The use of remote data collection techniques that allow key informants to be contacted, and can facilitate knowledge on humanitarian conditions on a more regular basis.

That being said, it must also be acknowledged that expectations on needs assessments are too high. They are often conducted as if they could answer all unknowns. As a result, too much data is collected and only a fraction is analysed while the life span validity of the information is generally limited to a few weeks.

In complex and dynamically evolving crises, regular situation analysis fits strategic and programmatic requirements better. Based on secondary data review and expert judgement, it enables geographical hotspots and key priorities to be accurately identified. This is generally good enough to trigger field assessments on specific topics, without losing sight of the overall context within which humanitarian outcomes unfold.

Effective situation analysis requires four elements:

- **Plan & prepare**
An assessment and analysis strategy needs to be in place at country level to identify annual milestones where situation analyses need to be available and updated. The approach should include clear linkages with sectoral and inter-sectoral field assessments, within or outside the NGO.

- **Coordinate & share**
A few NGOs coordinating and sharing the burden of data collation and analysis, and sharing access to expertise and staff with knowledge can develop a cost effective approach to situation analysis and shared situation awareness.
- **Collate & collate**
Both secondary and primary data collection should be planned for. More and more data is publicly available, and the power of secondary data is still underestimated compared to primary data.
- **Train & learn**
Humanitarian analysis is not reserved to an elite. The basics can be learnt quickly and decent examples of good analysis are now available to drive future efforts. The focus should be on national staff as they rotate less than expatriates and can develop historical context over time.

Field needs assessments conducted in a vacuum are too often inadequate and costly. More strategic thinking about their use and their purpose is required to use them only when no other choice is available and after making the most of existing information and expert knowledge. They are only really useful if they are part of a broader and smarter information system and strategy. Situation analysis is broader than needs assessment, more systematic, regular, cheaper and faster to implement. When undertaken in collaboration with other field actors, it becomes a catalyst for coordinated action and triggers only relevant field assessments that focus only on the "must know" rather than the "nice to know".

"WATER IS AT THE CONFLUENCE OF ENORMOUS ENVIRONMENTAL AND SOCIAL CHALLENGES"

By **FRÉDÉRIC MAUREL,**
DEPUTY MANAGER, WATER AND SANITATION DIVISION, AFD

In response to converging environmental, socio-economic and health crises, the Agence Française de Développement (AFD) intends to focus its investments on integrated approaches, particularly in the water and sanitation sector.

Fighting climate change is very much part of the Agence Française de Développement's DNA: 100% of the funding we provide complies with the Paris Agreement and half of it (over 6 million euros in 2019) directly contributes to achieving climate change mitigation or adaptation. Today, scientists believe that at least 30% of solutions to counter the effects of climate change depend on nature itself. In keeping with the integrated approach proposed by the Sustainable Development Goals (SDGs), and to demonstrate just how important biodiversity is to achieve the Paris Agreement goals, AFD has set itself a new objective to go even further: by 2025, 30% of AFD's climate funding must be devoted to fostering biodiversity and, by the same date, funding for biodiversity projects must exceed 1 billion euros, or twice the current amount.

We are drawing attention to these commitments because the water and sanitation sector already represents a large proportion of AFD's action: two-thirds of our funding in this field goes towards climate action, and one-third benefits biodiversity. Between 2014 and 2019, water and sanitation accounted for nearly half of AFD's adaptation activities. This is because local water management solutions lie at the confluence of all these major challenges and generate significant benefits, especially in water purification and environmental protection projects or river basin rehabilitation and flood prevention projects.

Alongside these converging climate and biodiversity issues, social and economic inequalities are widening all over the world. It is now widely accepted that the poorest countries, and the most vulnerable populations in these countries, are those worst affected by the consequences of environmental degradation; and that these inequalities hinder the implementation of sustainable solutions to manage shared natural resources like water. In view of

this situation, we must make sure that our goals to protect the planet and achieve social justice converge towards a fair transition. This is another of AFD's ambitions, through our 100% commitment to strengthen social bonds.

This dual approach applies to most of the countries where we work. However, it is even more critical in the most vulnerable regions, like the Sahel or the Middle East, both wracked by ongoing crises and conflicts. To develop water and sanitation services in fragile States, we must rethink our operational methods and turn to more agile approaches combining emergency relief and development. We are therefore working more closely with other organizations and NGOs, such as ACF in Jordan, ICRC in Iraq, WeWorld-GVC in Lebanon and GRET in Burkina Faso, using approaches that form part of this continuum and enable the social inclusion of refugees. In this way, our beneficiaries are able to maintain, rehabilitate and develop water and sanitation services, in situations where these are of the greatest necessity, as the current COVID-19 crisis has clearly demonstrated.

To convey all these messages beyond its own activities, AFD hosted the first edition of the "Finance in Common" summit last November, which brought together many of the 450 existing public development banks from all over the world. Their joint end-of-summit declaration expresses their commitment to harmonize their funding with the Paris Agreement, to support biodiversity and to step up the fight against inequalities. Within this framework, AFD has launched a water and sanitation coalition with several partners, to highlight the solutions that public development banks—including national banks—can implement to achieve SDG Goal 6. Since water is at the confluence of the enormous environmental and social challenges of our time, this advocacy and the actions that it engenders are more essential than ever before.

TO DEVELOP WATER SERVICES IN FRAGILE STATES, WE MUST (...) TURN TO MORE AGILE APPROACHES COMBINING EMERGENCY RELIEF AND DEVELOPMENT.

CHOLERA IN YEMEN: FRAGILE SITUATION

By **SABIT ABABOR ABABULGU**,
ABDULRAHEEM AL HATTAMI,
NOSHEEN MOHSAN and **MIKIKO SENGU**,
DISEASE OUTBREAK TEAM,
WHO COUNTRY OFFICE, YEMEN

CALLS FOR LONG-TERM SUPPORT

The cholera outbreak in Yemen, which began in late 2016, has become known as the largest cholera outbreak in history with over 2.4 million suspected cases reported as of December 2020. The protracted conflict, deteriorating humanitarian situation, food insecurity, malnutrition, water shortage, poor sanitation, population movement, and fragile health system have all contributed to the outbreak of this magnitude.

The control of cholera is a systemic challenge. As one of the driest countries in the world, Yemen has limited fresh water sources. Therefore, naturally, it has been difficult to develop WASH services, let alone achieve sufficient WASH coverage. For example, according to the REACH report¹, 20% of the entire population still practices open defecation, and 40% are without basic sanitation. Moreover, only one third of the Yemeni population is connected to piped water networks, leaving the remaining two thirds of the population to rely on trucked water supply. However, neither mode of access to water is considered safe. Urban sanitation services are particularly problematic, as the wastewater collection systems do not function properly. Moreover, wastewater is widely used in irrigation of food crops, posing health risks to the farmers, their families, the market operators, and the consumers.

Over the past four years, the Ministry of Public Health and Population as well as Health and WASH cluster partners have

scaled their emergency response to cholera by setting operational norms and standards, strengthening surveillance and laboratory capacity, improving clinical case management, ensuring WASH intervention activities, enhancing preparedness, and helping communities understand best practices for prevention and control. Oral cholera vaccination was introduced in Yemen in 2018, followed by successive campaigns in 2019 and 2020, thus far reaching 3.3 million people. These efforts have led to significantly reduced deaths from 0.29% in 2017 to 0.02% in 2020, demonstrating consistent progress in line with *Ending Cholera: A Global Roadmap to 2030*².

Since the beginning of 2020, the incidence of cholera in Yemen has gradually but steadily declined. While the reasons are likely multifold and should include the aforementioned efforts, the following factors – which are all unique to 2020 – may have affected how the cholera situation has evolved. First and foremost, coronavirus disease 2019 (COVID-19) has not only shifted focus and resources from cholera, but it may have also resulted in improved personal hygiene (i.e., hand hygiene), both resulting in a decreased number of cases. Second, a new intervention has been introduced in an effort to improve the quality of surveillance data by ensuring adherence to case definition: a two-hour observational period is applied to all patients arriving at health facilities before they are listed as suspected cholera cases. This observational period screens those who truly present acute diarrhoea from those who do not. Third, the provision of incentives by international

organizations – an initiative to ensure an adequate healthcare workforce amidst the humanitarian emergency – was discontinued in 2020 due to sustainability issues, possibly leading to fewer cases being reported. Lastly, the intensity of the conflict in the country has waned compared to the previous years, decreasing the risk of cholera among the most vulnerable groups of people, such as internally displaced persons.

The current circumstances may well be the calm before the next storm, and the cholera situation in Yemen requires diligence with long-term solutions aimed at rehabilitating water supply infrastructure and wastewater treatment systems to improve water quality. Equally important are continued efforts to rehabilitate sanitation grids and more generally improve sanitation and hygiene conditions combined with appropriate behavioral change. Yet, as of October 2020, less than 20% of the funding requirements of the Health Cluster³ have been met. To close the gap, USD 127 million was required in 2020, and there remains a dire need for support in 2021.

¹ *Yemen WASH Household Assessment 2018, REACH Initiative, 2019*

² who.int/cholera/publications/global-roadmap.pdf

³ reliefweb.int/sites/reliefweb.int/files/resources/hc_snapshot_jan_-oct2020_v2.pdf

PUTTING AFFECTED POPULATIONS BACK AT THE HEART OF HUMANITARIAN ACTION

By **LISE LACAN** and **MADELEINE TRENTESAUX**,
SOLIDARITÉS INTERNATIONALE

Over the past year, the Global WASH Cluster's Quality Assurance and Accountability Initiative (QAAI), led by UNICEF, Oxfam, SOLIDARITÉS INTERNATIONALE and Tufts University, has helped develop and disseminate new tools for adapting and improving Water, Sanitation and Hygiene (WASH) responses in order to better meet specific local challenges.

The Quality Assurance and Accountability Initiative (QAAI) has developed two tools to assist humanitarian WASH coordination groups with the implementation of a continuous, collective quality assurance and accountability system.

The first tool is a Guidance Note which breaks down the **quality assurance process¹ into 5 steps: define, measure, analyze, improve and learn**. The approach combines a continuous process of monitoring, analysis and improvement with a periodic review of lessons learned. Monitoring focuses on the collection of relevant, feasible and results-oriented measures. It gives priority to understanding the "reality on the ground," through the perspectives of people affected by the crisis.

The second tool is a **Modular Analytical Framework²** which defines basic standards, indicators and monitoring approaches to use and adapt according to the WASH intervention priorities of the given context. It is a **flexible tool used to identify** only the information necessary to improving the technical and programming quality and accountability of the response.

To date, three modules have been finalized: "Public Health Risks," "WASH Service Provision" and "People-centered Programming".

ADAPTING TO THE SPECIFICITIES OF THE FIELD

The QAAI team assists the national clusters of pilot countries to adapt proposed procedures and implement their own quality assurance and accountability system. The overall aim is to **take stock of the existing quality approach, and then adapt it to the priorities of field teams and local issues**.

Initial field missions have been carried out in four countries: Bangladesh, Myanmar, South Sudan and Colombia. Due to the Covid-19 pandemic, primarily remote activities were carried out in six other countries: Afghanistan, the Central African Republic, Haiti, Mali, Ecuador and Venezuela.

LAUNCHING THE QAAI IN SOUTH SUDAN

An initial visit to South Sudan took place in May 2019. The objectives were as follows: to improve understanding of the Water, Sanitation and Hygiene humanitarian response; to raise awareness about the initiative among the national WASH coordination; to identify a context-specific monitoring protocol; and, lastly, to develop an action plan for quality and accountability monitoring.

Following this mission, several indicators were integrated into WASH Cluster monitoring tools:

- Consultation of affected communities before the start of activities;
- Implementation of a feedback/complaint mechanism for affected populations;
- Taking consultations and feedback/complaints into account when adapting activities.

These indicators are collected and analyzed by cluster partners on a monthly basis in order to monitor beneficiary inclusion, participation and satisfaction. Additional indicators will be included in the coming months to provide a more complete picture of quality and accountability practices.

As this example makes clear, the strength and singularity of the QAAI lie in its continuous monitoring process, which allows for real-time adjustments in order to better align responses with the needs expressed by the affected population, thus placing beneficiaries at the heart of humanitarian action.

The lessons learned, best practices and technical resources developed by the initiative will be made available to all partners in order to support similar approaches outside of the WASH sector and beyond humanitarian action.

¹ **Quality Assurance & Accountability Systems, Guidance Note V1**
bit.ly/3rAmPx

² **Modular Analytical Framework for Quality and Accountability**
bit.ly/3p52bC4



WORLD WATER FORUM

Initially scheduled for 2021 but postponed to March 2022 due to the Covid-19 crisis, the 9th World Water Forum (WWF), in Dakar, Senegal, represents a critical milestone. The event, organized around the theme “Water Security for Peace and Sustainable Development,” must help get the world back on track to achieving the Sustainable Development Goals by 2030 via four priorities for transformative action: 1 - Water Security and Sanitation, 2 - Cooperation, 3 - Water for Rural Development, and 4 - Means and Tools. As the first event of its kind to be held in sub-Saharan Africa, a region whose population is expected to double over the next 30 years, this WWF must also take steps to include local stakeholders and representatives from the most vulnerable communities. To this end, an integrated preparatory process based on multi-stakeholder involvement has been put in place, breaking with the institutional organization of previous Forums.

MULTI-STAKEHOLDER PARTNERSHIPS FOR CONCRETE RESPONSES

By MAMADOU DIA, PRESIDENT OF AQUAFED (THE INTERNATIONAL FEDERATION OF PRIVATE WATER OPERATORS) AND PRESIDENT OF THE DEPARTMENTAL COUNCIL OF PODOR (SENEGAL)

Looking ahead to the 9th World Water Forum, Mamadou Dia calls on stakeholders to join forces and help get the world back on track to universal water and sanitation access, particularly in rural areas.

Working alongside many other development stakeholders, and often on unforeseen topics, AquaFed and SOLIDARITÉS INTERNATIONALE are united by a common goal: boosting political and multi-stakeholder mobilization around water and sanitation issues. Indeed, only through dialog and cooperation can major issues be addressed and real solutions proposed.

As we look ahead to the 2030 Agenda for Sustainable Development, the need for private-sector stakeholder involvement cannot be overstated. It is no secret that the gaps we are observing can't be closed, that the Sustainable Development Goals (SDGs) can't be achieved, without the meaningful, active and sustained involvement of businesses, within a framework of solid governance.

Whether improving water access, bolstering sustainability of sanitation services or protecting the environment and populations in shantytowns, rural areas or big cities, our challenge is to transform rights into a reality. The potential role of multi-stakeholder partnerships in this effort is quite clear. Although provided for by the SDGs, we still need more concrete responses in the field and stronger political will, particularly as far as prioritizing water and sanitation programs, especially in rural areas, is concerned.

Enforcing the right of every man, woman and child to water and sanitation calls, above all, for a solid understanding of what each of the various stakeholders can, and must, bring to the table. Partnerships must be built and managed on an equitable basis.

To this end, a holistic approach must be deployed to help rural areas make up for their substantial lag compared to urban areas, not just in terms of access to water and sanitation, but also in economic development and well-being.

Challenges including climate change, demographic growth and health crises like the Covid-19 pandemic call for joint mobilization

and collective efforts. 2021 will be a pivotal year for making advances in light of lessons learned from the current pandemic.

AquaFed and its members are closely involved in preparations for the 9th World Water Forum (WWF) set to take place in Dakar. As the first Forum to be held in sub-Saharan Africa, it presents a crucial opportunity for awareness-raising and decision-making on the road to delivering concrete responses for truly universal access to water and sanitation. It is also an opportunity to call attention to certain problems and highlight lasting solutions for improved territorial cohesion.

Actions such as these will help keep populations in place, thereby curbing illegal emigration while also boosting employment and employability among young people.

We look forward to working together to make the WWF a true success—one that goes beyond dialog to implement innovative, lasting solutions designed to meet the needs of rural populations (water, sanitation, health, energy, education, etc.).

As co-president of the “Water for Rural Development” priority, I invite all concerned stakeholders to get involved in the Dakar 2022 preparatory process.

AN INCLUSIVE PREPARATORY PROCESS

The Dakar WWF's priority “Water for Rural Development” hinges on several objectives: ensuring access to water and sanitation for all in rural areas; providing public Water, Sanitation and Hygiene facilities (in schools, health centres, etc.); ensuring sustainable farming practices; engaging and empowering rural communities to become catalysts of water-driven socio-economic development; and reducing the rural-urban gap in order to curb migration.

Action groups have been created for each of these priorities. In order to guarantee a multiparty approach and meet the Forum's goal of inclusion, each action group will be supported by a broader volunteer advisory group. To learn more about this advisory process, visit:

[WORLDWATERFORUM.ORG/EN](https://www.worldwaterforum.org/en)

“ACCESS TO WATER MUST BE DECLARED A GLOBAL EMERGENCY”

INTERVIEW¹ by ALAIN BOINET,
FOUNDER OF SOLIDARITÉS INTERNATIONALE

Jean-Bosco Bazie is managing director of Eau Vive Internationale, a federation of 6 development NGOs. He sounds the alarm on universal access to water and sanitation, especially in Africa.

Eau Vive Internationale has been working in Africa for over 40 years: which actions does it carry out?

Jean-Bosco Bazie: Eau Vive Internationale is an NGO founded in Burkina Faso that federates six national NGOs: Eau Vive Burkina Faso, Eau Vive France, Eau Vive Mali, Eau Vive Niger, Eau Vive Senegal and Eau Vive Togo. Thanks to their sustained action since 1978, over 3 million people in Africa now have better access to drinking water, and enjoy improved standards of hygiene and sanitation. More recently, with the outbreak of the Covid-19 pandemic, Eau Vive Internationale mobilized its partners to build new water points, rehabilitate broken water points, promote hand-washing facilities and raise people's awareness about adopting protective measures to prevent the disease from spreading.

As a development NGO, how do you carry out your operations in the Sahel, where the security situation has deteriorated?

J-B.B.: The Sahel region is currently suffering from three ailments: lack of water and decent living conditions, insecurity, and now the threat of the coronavirus pandemic. Despite this situation, we are continuing to support the population living in this region, where we mainly rely on local organizations to pursue our activities. Unfortunately, several financial partners no longer wish to fund activities in so-called “dangerous” areas, and this is a significant blow to humanitarian assistance, since it leaves us with insufficient resources to carry out our projects. As a humanitarian organization, we have no other option than to continue and consolidate our activities, however limited they might be.

What are your hopes for the 9th World Water Forum (WWF)?

J-B.B.: It is the first time that sub-Saharan Africa will host the largest global forum for water stakeholders. For Africa, there needs to be a real wake-up call, a call to make up for lost time regarding drinking water access, which as we all know is of vital importance. The continent's decision-makers made a commitment on water, which is recorded in the 2025 Africa water vision. This commitment, which African governments and the African Union made in March 2000, gives absolute priority to providing sustainable access to drinking water and sanitation for all, so that basic needs can be met by 2025. The Covid-19

pandemic is therefore a final warning for African leaders, who now only have 5 years left to fulfil the promise that they have neglected for 20 years. At the same time, several outbreaks of conflict and insecurity have driven thousands of people from their homes, onto roads and roadsides, with no outside help. And yet, the world has never been so wealthy. We declare that political and economic leaders must stop the hypocrisy that currently defines global geopolitics. The world's wealth must serve human beings and improve their lives, rather than being hoarded in tax havens. This is my heartfelt plea for the 9th WWF. Every minute counts, every drop of water counts to save lives. If we do not step up our current action, we are heading for the demise of humanity. Access to water and sanitation must be declared a “global emergency”.

¹ Excerpts from an interview published on the Défis Humanitaires website on 9 June 2020.

OBJECTIVE: THE “DAKAR FORUM”

In preparation for the “Dakar Forum”, 23 working/action groups have been formed on the theme of water security. Eau Vive Internationale and SOLIDARITÉS INTERNATIONALE are members of **Group 1 A: “Implement the right to water and sanitation and provide access to safe water and sanitation in emergency situations”** (Sustainable Development Goals 6.1, 6.2, 1.4, 11.1). This group brings together ten organizations and is coordinated by Eric Momanyi from the Gates Foundation. It comprises three sub-groups:

- 1. Water and sanitation in emergency situations,** led by Alain Boinet;
- 2. Implement the right to water,** led by Luke Wilson from CWSC/USA and Joseph Maurice Moukoue from RECOJAC/Cameroon;
- 3. Implement the right to sanitation,** led by Eric Momanyi from the Gates Foundation.

“INITIATIVE DAKAR 2021”: AN INNOVATIVE APPROACH TO WATER AND SANITATION CHALLENGES AT THE GLOBAL LEVEL

By ALLASSANE TRAORÉ,
REGIONAL WATER, SANITATION AND HYGIENE ADVISOR
FOR SOLIDARITÉS INTERNATIONALE (DAKAR OFFICE)

Ahead of the 9th World Water Forum, the organizing committee has launched an unprecedented call for WASH projects. Winning projects will receive the label “Initiative Dakar 2021,” a chance to gain international exposure, forge partnerships and possibly secure funding from WWF partner institutions.

The World Water Forum (WWF) is the world's biggest water and sanitation event. Since its first edition in Marrakesh, Morocco, in 1997, organizers have continually improved upon the event's preparation, content and format to create a vibrant and incisive event that more than meets expectations.

In keeping with this innovative spirit, the 9th World Water Forum, set to take place in Dakar, Senegal, in 2022, will unveil a major new component called “Initiative Dakar 2021.” This program-oriented initiative seeks to foster ideas, proposals and concrete projects implemented in the field, in keeping with the 9th Forum's mission statement: “From commitment to concrete actions on the ground.” At the instigation of the global water community, Senegal and the World Water Council, “Initiative Dakar 2021” will thus be central to preparing and hosting the WWF. This new development signals a shift in the event's focus toward the imperative of finding concrete solutions to communities' urgent needs.

The WWF has always been an important occasion for SOLIDARITÉS INTERNATIONALE. We have demonstrated our dedication to the event through our worldwide mobilization, involvement

of our local partners and our active participation in Water and Sanitation awareness-raising and advocacy.

“Initiative Dakar 2021” and the 9th WWF are, accordingly, eagerly anticipated by SOLIDARITÉS INTERNATIONALE as we enter the 41st year of our fight to provide access to Water, Sanitation and Hygiene for all. Of the 18 countries where we intervene, 9 are in Africa (South Sudan, DRC, CAR, Chad, Cameroon, Nigeria, Niger, Burkina Faso and Mali). With 50% of our countries of operation located on the African continent, and more specifically in Central and West Africa, where the World Water Forum will be held, the event will thus be of critical importance to us.

The “Dakar 2021” proceedings will be the springboard for our interventions and actions for years to come and will also help shine a light on what has long been invisible: the self-sacrifice of communities and their enduring fight for access to Water and Sanitation.

It is a daily fight—for their health, for their lives, for their survival. To deliver concrete responses, our teams take innovative approaches in their constant quest to adapt available means to field constraints and to the specificities of each intervention.

With our new 2020-2025 Water, Sanitation and Hygiene Strategy (see p. 8), SOLIDARITÉS INTERNATIONALE's ambitions go beyond emergency response to encompass strengthening access to basic services and promoting a global, inclusive approach to improving the health, dignity and well-being of vulnerable, crisis-affected populations. Indeed, we have launched a number of innovations and the “Dakar 2021” proceedings will give us an opportunity to present our projects surrounding the fight against cholera, emergency sludge management and the sustainable development and management of WASH services in degraded contexts (see articles on pp. 41, 42 and 44).

The “Initiative Dakar 2021” label recognizes community projects aimed at providing adequate access to drinking water and sanitation. Labeled projects are expected to present tangible results at the WWF in 2022. The initiative is an opportunity to create a real win-win partnership among the World Water Forum, financial backers and the organizations carrying out these projects in the field.

FOR MORE INFORMATION, VISIT THE OFFICIAL WWF WEBSITE:

WWW.WORLDWATERFORUM.ORG/EN/9TH-FORUM/LABEL-YOUR-PROJECT-TROUGH-THE-INITIATIVE-DAKAR-2021

WATER ACCESS FOR ALL:

STAYING MOBILIZED IN THE CURRENT CONTEXT

BY JEAN LAUNAY,
PRESIDENT OF THE FRENCH WATER PARTNERSHIP

The French Water Partnership (FWP) and its members are not immune to the devastating global impact of the pandemic. Faced with postponed events, deferred advocacy campaigns and delayed progress, our working groups had no choice but to adapt—a practice to which we are, fortunately, well accustomed.

The water sector, alongside other essential sectors including waste management and energy, has been vital to the resilience of our societies against Covid-19, ensuring as it has the continuity of drinking water and sanitation services. Moreover, wastewater treatment plants have acted swiftly to share information on the progression of the virus gleaned from traces detected in wastewater. The Scientific and Technical Association for Water and the Environment (ASTEE) recently cited the sector's centrality to health risk prevention, from protecting water agents and hygienizing sludge at treatment stations to supporting research projects studying the progression of SARS-CoV-2.

The vast majority of the French population has been able to count on an extremely reliable and robust sector, a fact that merits emphasis as we look back on the lessons learned from a particularly turbulent year. Another point worth highlighting: humanitarian organizations such as SOLIDARITÉS INTERNATIONALE and Action Contre la Faim (both members of the FWP) deemed the emergency context arising from the pandemic dire enough to warrant an intervention on French soil for populations not connected to drinking water networks. The fight against the pandemic has, thus, also served as a reminder that pockets of the French population have been living without access to this essential service—a reality which poses a health risk to the whole of society.

But what about our international concerns? How has the current crisis impacted the core missions of the FWP and its members? How do we stay mobilized and move forward in this context?

Initially, our members felt the need to put their heads together on the pandemic situation which continues to rule our lives. The question of safe water supplies, alluded to above, quickly came up, as did its centrality to hygiene and infection prevention measures. Our working

groups "Water in the Sustainable Development Goals (SDGs)" and "Aquatic Biodiversity and Nature-based Solutions (NbS)" brainstormed on the topics of water-related pandemic risks, environmental risks and the post-Covid world.

A LESSON IN RESILIENCE

The health crisis has shed new light on the cross-cutting nature of the issues we are working on, including ecosystem preservation, environmental security and zoonoses¹ (which Covid may or may not be); extreme climate phenomena, water security and development; public health and access to drinking water, sanitation and hygiene; and so on. By further disrupting the relative equilibrium of our societies, the health crisis has underscored that resilience can only come from a truly systemic approach.

In 2020, the FWP managed to make headway on its projects and use the time "freed up" by the health crisis to reevaluate its approaches and activities. This process reaffirmed our overarching objective of working towards the achievement of the SDGs—a systemic, cross-cutting approach if ever there was one. Moreover, 2020 marked the first year of the Decade of Action which must see us reach these goals. After helping to draw up the French roadmap, we are now mobilized alongside the primary French stakeholders involved in this effort, in France and abroad. Our working group "WASH (Water, Sanitation and Hygiene) in Crisis and Fragile Contexts" has secured long-term funding and appointed a president. It recently joined the UN's Global WASH Cluster. Our working group dedicated to water

THE HEALTH CRISIS HAS UNDERSCORED THAT RESILIENCE CAN ONLY COME FROM A TRULY SYSTEMIC APPROACH.

and climate change has launched studies on the carbon footprint of water and sanitation services and on the impact of carbon capture and storage on groundwater, a growing area of concern. Finally, at the instigation of its president, Marie-Hélène Aubert, our working group on aquatic biodiversity and nature-based solutions organized our first field seminar in Rochefort, France, in October 2020, and has launched a study of internal, coastal and marine water governance.

If 2020 was marked by the cancellation of all major international summits in which the FWP normally takes

part, the next three years will be filled with high-impact events: those postponed to 2021 first and foremost (i.e. COP26 on climate, COP15 on biodiversity, World Water Week), but also the IWA World Water Congress, a "high-level" meeting on water at the UN, the United Nations' Food Systems Summit, and AidEx 2021. In 2022, the 9th World Water Forum will take place in Dakar, and in 2023, the United Nations will host its first water conference in decades in New York.

¹ Diseases or infections which can be transmitted from vertebrate animals to humans and vice versa.

A WORKING GROUP DEVOTED TO WASH IN CRISIS AND FRAGILE CONTEXTS

In 2013, the FWP created its 4th thematic working group around the topic of Drinking Water, Sanitation and Hygiene (WASH) in crisis and fragile contexts. Funding commitments secured in 2019 will sustain the group in the long term.

This working group stems from the observation that fragilities are persisting and increasing. In 2020, prior to the coronavirus, around 23% of the world's population was living in a state of fragility as defined by the OECD. **By 2030, this number is expected to rise to 26%—over a quarter of the world's population¹.** In the most fragile zones, the minimum standards² of access to basic services are rarely met. Yet access to the bare minimum is a question of survival.

In keeping with the SDGs and their universal aim, it thus seems only logical for us to direct our efforts towards those populations left behind because they are "too hard to reach."

The humanitarian and development phases of intervention go hand in hand

for populations worldwide who are caught up in overlapping cycles of crisis and relief.

In 2020, our multi-stakeholder working group took action to:

- **Pool and make optimal use of members' expertise** through thematic workshops (i.e. WASH-sector technologies, WASH and Nutrition, showcasing innovations).
- **Provide a coordination platform** to determine "who does what where" at quarterly meetings or during sudden crises, such as the onset of the Covid-19 epidemic.
- **Develop a joint advocacy strategy** for the years to come, centered on three major areas for improvement:
 - better integration of the WASH and Health sectors;
 - better protection for WASH services in conflict zones;
 - capacity building for WASH and all other "life-saving" sectors.

In 2021 the group will continue to pursue this drive for coordination, optimal use of expertise and advocacy. As it



Humanitarian WASH Workshops 2020
Credit: Médiathèque Veolia-Olivier Guerrin

stands, the group's primary members are those already intervening in fragile zones. The next year will, accordingly, be geared towards encouraging many other French stakeholders to join the group—because all FWP members have resources (expertise, funding, HR, etc.) that can be mobilized to help us achieve these minimum standards and put us on the road to achieving SDG 6 for all by 2030.

¹ OECD, *States of Fragility 2020*
read.oecd-ilibrary.org/development/states-of-fragility-2020_ba7c22e7-en#page34
² *Sphere Handbook, second edition, 2018*
handbook.spherestandards.org/en/sphere/#ch001

FOR MORE INFORMATION ON THE MEMBERS AND ACTIONS OF THE WORKING GROUP:

[PARTENARIAT-FRANCAIS-EAU.FR/EN/THEMATIQUE/EMERGENCY-RECONSTRUCTION-DEVELOPMENT/](https://partenariat-francais-eau.fr/en/thematique/emergency-reconstruction-development/)

SOLUTIONS & INNOVATIONS

Digital transformation, skill building, integrated approaches, pooling of resources, growing involvement of community focal points... International humanitarian stakeholders are stepping up their efforts and creativity in order to maximize the impact of their interventions wherever needs require it.

STAYING FOCUSED ON QUALITY AMIDST GROWING UNCERTAINTY

By ANNE-LISE LAVAU, DEPUTY DIRECTOR OF OPERATIONS FOR PROGRAMS, SOLIDARITÉS INTERNATIONALE

The Covid-19 pandemic has led us to reassess all of our actions—in the field, of course, but also at our headquarters. When the global lockdown suddenly threatened to cut off populations' access to material and human assistance at a moment of critical need, we were forced to adapt our responses and to take action to protect both our teams and beneficiary populations.

This situation even disrupted the quality standards of our operations.

Homebound, physically isolated from one another and unable to travel to our intervention zones, let alone move about locally, throughout 2020, we came to rely heavily on information and communication technologies (ICT). Our use of technology didn't simply evolve, it expanded vastly—as did the associated data protection risks—all while providing a stark reminder of how central rational and purposeful data use is to our work.

Humanitarian professionals are used to working in unstable contexts, but the uncertainty they faced this time was of a much larger scale, encompassing other sectors, stakeholders, areas, countries, etc. After years of leading the fight against cholera and Ebola, we were now facing a major global health crisis, the scope of which no one could have anticipated. How were we to act amidst ever-growing uncertainty? Organizational sociology stresses the apparent irrationality and unpredictability of behaviour within organizations. As the current crisis plunges us deeper and deeper into unpredictability, frames of reference have been turned upside down, leaving each of us to find our place along a precarious new equilibrium. But out of this chaos, a battle formation has emerged, accelerating change and allowing us to see the light at the end of the tunnel sooner than we had expected. After an initial period of surprise and adjustment, the humanitarian sector has shifted into crisis management mode, demonstrating its agility and coming up with impressive solutions—proof that perhaps innovation and variety are less the product of genius than of flaws and crises¹, and can yield real solutions to the most serious problems.

¹ *Le vide et le plein*, Nicolas Bouvier, 2004.

Notes from the field

INNOVATING TO KEEP ACCESS OPEN

By FRANCIS TEHOVA, COUNTRY DIRECTOR BURKINA FASO, SOLIDARITÉS INTERNATIONALE

Since 2016, Burkina Faso has been ravaged by a sweeping humanitarian and security crisis, with a skyrocketing number of internally displaced persons (1,074,993 as of 31 December 2020). Since 2018, the situation has further deteriorated, making it difficult or even impossible to deliver a conventional humanitarian response in areas where needs are most pressing, and especially in remote locations.

In order to maintain access in certain areas, SOLIDARITÉS INTERNATIONALE has had to develop innovative new ways to intervene. For instance, rather than carrying out standard borehole drilling and rehabilitation operations, our teams relied on community focal points to address water point repair needs (replacing hand pumps, rehabilitating superstructures, training management committees and providing maintenance kits) impacting over 11,400 beneficiaries in the towns of Arbinda, Diguel and Baraboulé.

Community leaders and qualified repairers were invited to Kongoussi, a safer location, to receive training in these procedures. Rehabilitation equipment was delivered by tricycle, a solution made possible by the involvement of community leaders. Our teams carried out monitoring via telephone, using WhatsApp to share information and project updates.

EPIDEMIOLOGICAL SURVEILLANCE:

By **BACHIR ASSAO**, EPIDEMIOLOGIST and **ARTHUR MAKADI**, RESEARCH ASSISTANT, EPICENTRE RESEARCH DEPARTMENT

DIGITALIZATION BRINGS PROGRESS

To fight Covid-19, digital tools have taken on a more important role in epidemiological surveillance and management. Epicentre, a cutting-edge epidemiology, research and training NGO created by MSF, is convinced that digitalization could also provide solutions for other public health issues.

The aim of epidemiological surveillance systems—sometimes known as information for action—is to provide teams in charge of health programs and public health policies with the necessary information to respond effectively to a given problem. An effective surveillance system can identify cases or groups of cases and launch an investigation (ranging from a phone call to a field inspection) to determine the cause and scale of the alert, which then triggers an appropriate, targeted response.

COVID-19 ALERT IN NIGER

In response to the Covid-19 crisis, digital tools have taken on a more important role in epidemiological surveillance and management. Coordinating response activities to contain the epidemic is now a critical priority, chiefly to prevent healthcare systems from being overwhelmed. To achieve this objective, the Nigerien Ministry of Health called on Epicentre, the MSF Foundation and Medic Mobile to set up the Covid-19 Alert platform and application.

Covid-19 Alert is a data management tool that handles the collection and investigation of operational Covid-19 alerts throughout Niger. It enables health workers and focal points at healthcare centres and hospitals to identify and notify Covid-19 alerts on a dedicated platform that centralizes data from the national alert centre and regional alert centres. Suspected Covid-19 case alerts are then immediately redirected to each region and assigned to investigators, who initiate a field investigation and take patient samples to test these cases. Since it was set up, the Niger Covid-19 Alert system has managed all alerts received by the country's emergency call centres, amounting to over 8,400 calls at the time of writing.

While Covid-19 remains a priority, this epidemiological surveillance platform could also be used for other public health issues, such as malaria, measles, malnutrition or cholera. It is therefore essential to incorporate digital tools into Epicentre's routine activities—from training teams to implementing projects and developing infrastructure—in order to unlock their full potential.

GOMA ALERT SYSTEM (DRC)

The project to enhance monitoring of chronically-ill patients in the Democratic Republic of Congo (DRC) is one example of the many possibilities offered by this type of platform. In the city of Goma, Médecins Sans Frontières (MSF) supports 3,000 patients suffering from AIDS or tuberculosis. Covid-19 has made it much more difficult to supervise these patients, since visiting patients to monitor their health can potentially spread the virus.

The application implemented in Goma—thanks to the joint efforts of Epicentre, the MSF Foundation and Medic Mobile—enables the monitoring team to communicate with patients by phone (smartphone or other mobile phone) by sending text messages and automatic daily or weekly questionnaires, according to needs. The patients' replies are automatically sorted, enabling staff to then investigate the most problematic cases by phone or face to face. By automatically sending questionnaires to patients and generating medical follow-up alerts, the system makes it easier for MSF staff to closely and optimally monitor a large number of patients, whether during an epidemic or during routine surveillance periods.

FACILITATING COORDINATION

The Alert platform presented in this article is one example of a modular digital solution (SMS, application, call centre, web platform) that meets surveillance needs by monitoring symptoms within a large population of individuals, either in real time (Niger) or by automatically sorting data and allocating patient monitoring tasks, for example during the first few months of an epidemic (Goma). By integrating other existing dashboards (for example DHIS2¹), the Alert platform could also facilitate project coordination by providing a dynamic overview of real-time data.

¹ Open-source software platform used for health program data reporting, analysis and distribution.

MORE QUALIFIED WASH ACTORS TO MEET WATER CHALLENGES

By **GILLES COLLARD**, MANAGING DIRECTOR OF BIOFORCE

To overcome challenges in providing access to drinking water, sanitation and hygiene services, to intervene quickly and to implement high-quality operations, we need to be able to count on qualified professionals, ready to act wherever and whenever necessary. For nearly 40 years, Bioforce has provided training solutions in Water, Sanitation and Hygiene (WASH) and other humanitarian sectors based on a comprehensive approach: train individuals, strengthen organizations and always favor local expertise.

BUILDING THE NEXT GENERATION OF PROFESSIONALS

*The State of Humanitarian Professions 2020*¹ highlights two related problems in the WASH sector: organizations struggling to recruit qualified staff and skilled individuals struggling to break into the field. The solution is, first and foremost, to build and nurture a pool of new professionals, ready to intervene wherever necessary. Each year, we train 36 Water, Sanitation and Hygiene project managers in our Europe and Africa training centres. In 2021, we expanded to the Middle East with the launch of our WASH Master's program in Amman, in partnership with the German-Jordanian University (GJU) and Action Against Hunger.

STRENGTHENING TEAM EXPERTISE

In parallel, we help humanitarians (especially national staff) take their skills to the next level. To meet the needs of working professionals, our diploma courses can be completed "at your own pace" over several years. We also offer short intensive courses at our regional centres and, as is increasingly the case, directly in the field. Additionally, we work alongside humanitarian organizations and their national partners to develop customized training programs.

ADAPTING OPERATIONAL SKILLS TO NEW CHALLENGES

A hands-on, operational learning experience, enriched by our collaboration with specialized organizations (SOLIDARITÉS INTERNATIONALE, Action Against Hunger, DWB Belgium, etc.), is at the core of our approach, as can attest Thomas, a former WASH program manager for SOLIDARITÉS INTERNATIONALE in the Central African Republic: "During my mission, I constantly found myself in situations I had dealt with at Bioforce, and every time, I applied the solutions I had learned [...], which meant I had no trouble taking charge out in the field." Working hand in hand with the Global Wash Cluster and all major WASH stakeholders, our whole team is constantly mobilized to align our courses with the latest challenges. We have bolstered our offerings in the areas of public health, integrated water resources management, sustainability of programs, climate change and environmental health. We have adapted our courses to take into account the rising number of urban interventions. Coordination, market-based interventions and multisectoral approaches (WASH and nutrition, irrigation, etc.) are, now more than ever, at the heart of our training. Our courses share a common foundation, but each one is tailored to a specific regional context: in the Middle East, for example, where there is no shortage of technical expertise, the

focus is on hygiene promotion, community engagement and water scarcity.

Behind every effective WASH intervention to assist crisis-affected populations stand qualified professionals whose training has also equipped them with the tools necessary to fight epidemics and improve public health.

¹ *The State of Humanitarian Professions, Bioforce, 2020*
bioforce.org/sohp2020.pdf

BIOFORCE provides training and support solutions to deliver effective, high-quality aid to vulnerable populations.

- **Water, Sanitation and Hygiene Project Manager (equivalent to a one-year master's degree or Bac+4)**, at our Europe and Africa training centres. Enroll in a 6-month diploma course or learn at your own pace. APL certification available (in French only).

- **Humanitarian WaSH Master's Degree**, in Amman (Jordan), 18 months.

washmsc.com

FOR MORE INFORMATION:
BIOFORCE.ORG

MALNUTRITION: INTEGRATED WASH AND FOOD SECURITY RESPONSES

By **LISE LACAN** and **JULIE MAYANS**,
SOLIDARITÉS INTERNATIONALE

From nutritional deficiencies and the effects of climate change to insufficient access to healthcare or water, sanitation and hygiene (WASH), a number of factors can lead, directly or indirectly, to malnutrition. This is why, over the past several years, SOLIDARITÉS INTERNATIONALE has developed integrated WASH, Food Security and Nutrition approaches to fight the affliction.

Malnutrition is a major public health problem. In 2019, 1 out of every 3 children under the age of 5—some 200 million children—was either undernourished¹ or overweight². Getting adequate nutrition in early childhood is essential to healthy physical and intellectual development. Nutritional deficiencies at this stage of development can, of course, lead to diseases or death, but they can also have long-term effects on social and cognitive abilities, success in school, productivity at work and, by extension, hold back an entire country's socio-economic development.

The causal link between insufficient access to drinking water and sanitation infrastructures and nutritional deficiencies is well documented³. Inadequate sanitation facilities and open defecation, an ongoing daily reality for 1 billion people, are proven causes of water source contamination, which leads to an increased risk of diarrhoea and associated problems: loss of appetite, dehydration and malabsorption of nutrients. Every year, 2.1 million children die as a direct or indirect consequence of diseases linked to unclean water or inadequate sanitation. The combination of inaccessible sanitation services and poor hygiene thus factors into 88% of deaths from diarrhoeal diseases.

The link between undernutrition and food security is even more indisputable. A number of diet-related factors can come into play, including lack of access to or availability of suitable nourishment and poor food safety practices (food hygiene, conservation, preparation, etc.). Providing support for crop and livestock farming in order to foster food self-sufficiency or raising awareness about good food safety practices are just two examples of food security interventions that can help prevent risks and bring malnourished children back to health.

To fight undernutrition and reach the World Health Organization's 2025 global targets, we need to adopt a multisectoral approach aimed at improving sanitary conditions and access to adequate nourishment for all.

This is why SOLIDARITÉS INTERNATIONALE has been carrying out integrated WASH, Food Security and Nutrition projects. As part of this effort, our NGO has joined forces with medical stakeholders such as ALIMA, an organization we have been working with since 2018 to fight mortality linked to malnutrition in the Far North region of Cameroon. Insecurity and massive population movements in the region have plunged countless families into a state of serious vulnerability. SOLIDARITÉS INTERNATIONALE is on the ground there, distributing food vouchers to purchase nutritional products and leading awareness-raising sessions to teach good food safety practices. To break the vicious cycle of diarrhoea and malnutrition, our teams are distributing hygiene kits to families with malnourished children being treated at health centres. We are also working to improve access to WASH services and infrastructures in health centres and communities, and are building local capacity to ensure their long-term sustainability.

Integrated projects like these yield tangible results, but in order to be effective, they must be carried out over the long term and accompanied by a change in practices at the local government level and among the populations themselves. SOLIDARITÉS INTERNATIONALE aims to systematize this approach and implement it in every one of our countries of intervention afflicted by malnutrition.

¹ Undernutrition occurs when a person's diet lacks the nutrients necessary for them to grow and thrive, or when they are unable to fully digest the food they take in as a result of illness.

² *The State of the World's Children 2019 - Children, Food and Nutrition: Growing Well in a Changing World*, UNICEF, 2019

³ *Improving nutrition outcomes with better water, sanitation and hygiene: Practical solutions for policy and programmes*, WHO, UNICEF, USAID, 2015

OUR NGO HAS JOINED
FORCES WITH MEDICAL
STAKEHOLDERS
TO FIGHT MORTALITY
LINKED TO
MALNUTRITION.

MALI: **By SOLIDARITÉS INTERNATIONALE's Mali mission** AN INTEGRATED WASH AND NUTRITION RESPONSE FOR THE MOST VULNERABLE

Since December 2020, SOLIDARITÉS INTERNATIONALE's teams have been helping to fight malnutrition in the northern and central regions of Mali by improving access to water and sanitation in healthcare centres and informing families about malnutrition screening techniques.

Since 2012, Mali has been confronted with numerous security tensions, intercommunal conflicts and natural disasters. These recurrent crises have caused massive population displacements, putting increased pressure on the country's limited resources and infrastructure. Inadequate access to basic services, and especially to sufficient quantities of safe drinking water, has made fragile populations even more vulnerable to waterborne diseases and thus to malnutrition (read our article on page 38 to

find out more about the connection between inadequate access to water and malnutrition). In February 2020¹, food insecurity rates were well over 20% in regions hosting large numbers of displaced persons, such as Mopti (23.3%), Kidal (24.6%) and Gao (38.4%), in comparison with the national average of 16%.

In response to this crisis, SOLIDARITÉS INTERNATIONALE has implemented an integrated WASH and Nutrition program in the northern and central regions of Mali. Since late 2020, our teams have been working to improve access to water and sanitation in several healthcare centres, by distributing hygiene kits, handwashing systems and soap to parents of malnourished children. They are also informing and training women to detect acute malnutrition so that their child(ren) can be treated at the first signs of illness.

¹ ENSAN Mali, February 2020

TESTIMONY

HAWA MOUCHÉ, 30 years old, mother
of 4 children, lives in Echell village in North Mali

"SOLIDARITÉS INTERNATIONALE's teams trained us to screen our children for malnutrition. We screen children between the ages of 6 and 59 months. They showed us how to spot the signs of malnutrition in a child. They also explained how to measure his or her Mid-Upper Arm Circumference. They taught us that if the reading is in the green, the child is in good health, however if it is in the orange, the child has started to fall ill. If the reading is in the red, the child is already sick and we must immediately take him or her to the community health centre. SOLIDARITÉS INTERNATIONALE also showed us how to test children for oedema: we hold both feet tightly against ourselves and count to three; if the child has malnutrition, there will be a mark on the skin. Since we received this training, our children are in better health, whereas before the course, they were often sick."



ADAPTING TO COVID-19: TAKING OUR ACTION FURTHER TO MEET URGENT NEEDS

By **XAVIER LAUTH**, EMERGENCY TEAM MANAGER AT SOLIDARITÉS INTERNATIONAL

Our biggest challenge in 2020 was to ramp up our activities in spite of constraints, and to take into account new needs arising from the fight against Covid-19, while continuing to deliver essential humanitarian assistance for other crises.

As the Covid-19 pandemic raged throughout 2020, SOLIDARITÉS INTERNATIONAL was forced to adapt its activities and rethink some of its intervention methods to protect its teams and beneficiaries from the virus, but also to adjust to new logistical challenges: the suspension of international flights and national lockdowns or travel restrictions (see inset on the humanitarian airlift).

In March 2020, SOLIDARITÉS INTERNATIONAL and Médecins du Monde launched joint operations on French soil to help those most in need follow Covid-19 infection prevention measures and maintain their hygiene and dignity amidst a national lockdown. Our teams distributed hygiene products and installed drinking water connections and taps in several shantytowns and other makeshift sites in the Greater Paris, Nantes and Toulouse regions. 100% of those queried in a follow-up survey declared that having secure access to drinking water had improved their day-to-day living conditions: a statistic that has encouraged us to look beyond our usual crisis settings to assist vulnerable populations closer to home.

Our emergency teams assisting Venezuelan migrants in Colombia have similarly adapted their activities to meet the specific needs of Colombian health facilities and protect migrants whose mobility has been hindered by anti-Covid-19 measures.

SOLIDARITÉS INTERNATIONAL also managed to work around pandemic-related travel restrictions to open an office in Niger, where it launched operations in April 2020. Access to WASH services is limited or hindered for part of the population as an armed conflict between security forces and radical groups as well as devastating floods have taken their toll on the country. Our teams swung into action to meet the emergency water needs of flood victims in Niamey and improve WASH access conditions for displaced persons and host communities in the Tillabéry region.

In November 2020, in spite of the global health crisis, our NGO also decided to deploy an emergency team to Sudan—where our teams had previously intervened between 2004 and 2009—to assist tens of thousands of refugees flooding in from neighboring Ethiopia amidst violent clashes between the national army and the armed branch of the Tigray People's Liberation Front.

Finally, in December 2020, our emergency teams carried out an exploratory mission and initial distribution of hygiene items in North West Nigeria, where tens of thousands of people are fleeing intercommunal violence and pillaging and where few NGOs are present.

A SUCCESSFUL HUMANITARIAN AIRLIFT

As the Covid-19 crisis brought air travel to a halt, the European Union's (EU) humanitarian airlift—coordinated by the Réseau Logistique Humanitaire (RLH), a collective of international NGOs cofounded by SOLIDARITÉS INTERNATIONAL—assessed and consolidated the equipment and passenger transport needs of European humanitarian organizations. Funded by the EU and the Crisis and Support Centre of the French Ministry of Foreign Affairs, the initiative aimed to identify unserved connections, take stock of transport capacities, plan flights and ensure coordination along the entire decision-making and logistics chain.

The operation's success showcased the capacity of NGOs to coordinate, share resources and display synergy in the face of the Covid-19 crisis. More broadly, it showed that collaboration among NGOs is the best path to delivering a dynamic, effective and targeted response to humanitarian challenges.

KEY FIGURES

Within 5 months:

42 flights to **12 different countries**

1,208 passengers

Over **780 tons** of vital medical and humanitarian equipment

108 participating organizations

STRENGTHENING DRINKING WATER SERVICE RESILIENCE IN BURKINA FASO

By the **Direction of Operations** for SOLIDARITÉS INTERNATIONAL in Burkina Faso

SOLIDARITÉS INTERNATIONAL is working alongside GRET, Groupe URD and ONEA to develop operating procedures to maintain and strengthen water supply services in Burkina Faso despite the security crisis.

SECURITY CRISIS PUTS A STRAIN ON WATER ACCESS

Over the past three years, Burkina Faso has seen a substantial increase in humanitarian needs as a result of dramatically deteriorating security conditions. The last few months have been trying as conditions have further deteriorated in several regions (Sahel, Nord, Centre-Nord and Est). And with intensifying conflicts come significant population movements: the current tally stands at over 1 million¹ internally displaced persons, the majority of whom are concentrated in urban centres where the sudden population growth is placing an acute strain on water supply services. In some areas the strain is particularly severe, with over 1,200 people per modern water point² despite a national norm of 300 maximum. In these cases, the influx of displaced persons has caused water supply needs to triple. The situation is compounded by an increase in infrastructure breakdowns as public authorities and State representatives (frequent targets of terrorist attacks) have often partially or totally withdrawn their teams from intervention zones.

AN INNOVATIVE APPROACH RECONCILING EMERGENCY AND DEVELOPMENT STRATEGIES

Faced with the urgent need for a more integrated and sustainable response to the Sahelian humanitarian crisis, SOLIDARITÉS INTERNATIONAL, GRET, Groupe URD and Burkina Faso's National Bureau of Water and Sanitation (ONEA) have joined forces to develop and deploy an innovative approach combining emergency response and development strategies. The goal is to maintain and strengthen public water services in vulnerable areas—particularly those areas where forcibly displaced persons are most heavily concentrated.

Dubbed "The Project to Strengthen Resilience of Public Drinking Water Services in Crisis Contexts" (P2RSP) and carried out with funding from the French Development Agency (AFD) and USAID, the initiative aims to plan and coordinate investments and operations in emergency situations, bolstered by a long-term strategy entailing verification that public service principles (pricing and equity of access) are upheld in the short and medium term.

This approach should help strengthen the resilience of public drinking water supply services in five metropolitan areas in the country's Nord (Titao, Ouahigouya, Oula and Segouenega) and Centre-Nord (Kongoussi) regions.

The project has the following three objectives:

- 1. Build the capacity of ONEA and municipalities to organize, fund and maintain water services amidst a humanitarian and security crisis.**
- 2. Maintain and strengthen public water supply service performance in terms of coverage, organization, management, and technical, financial and commercial monitoring.**
- 3. Monitor, evaluate, capitalize and disseminate methodologies developed and lessons learned with a view to possible replication in Burkina Faso's main urban centres hosting forcibly displaced persons.**

The project is helmed by SOLIDARITÉS INTERNATIONAL (project leader) and GRET, in collaboration with institutional and operational partners such as ONEA and municipalities. Groupe URD will carry out a monitoring-evaluation and capitalization mission in close collaboration with SOLIDARITÉS INTERNATIONAL and GRET.

A MODEL FOR FUTURE INTERVENTIONS

This innovative project, which seeks to define and operationalize the emergency-development "nexus" in the drinking water sector, is the first of its kind. If successful, it could ultimately spur significant practical and organizational changes to the sector in Burkina Faso. The AFD and USAID see the project as a high-impact regional pilot with the potential for replication in other countries.

¹ Conseil National de Secours d'Urgence et de Réhabilitation (CONASUR), November 2020. conasur.gov.bf
² Boreholes equipped with a pump



LEBANON: INNOVATIVE WASH SOLUTIONS FOR SYRIAN REFUGEES

By **YANN PASTEL**,
WASH COORDINATOR FOR
SOLIDARITÉS INTERNATIONAL IN LEBANON

Since 2013, SOLIDARITÉS INTERNATIONAL has been working in Lebanon to assist 75,000 Syrian refugees scattered across 1,600 informal tented settlements in the Bekaa and Akkar. Large-scale needs and deteriorating conditions have driven our teams to constantly innovate in order to deliver the most suitable and sustainable water and sanitation responses.

In Lebanon, most of the population gets their water from private, unregulated wells or water delivery trucks. Only 8% of wastewater is treated. The 1.5 million Syrian refugees in the country—310,000 of whom are living

in 5,900 informal tented settlements (ITS)—represent an additional strain on infrastructures, resources and the environment. This situation has been compounded, since October 2019, by ongoing socio-economic and political

turmoil, and now, on top of that, the Covid-19 epidemic: the current crisis has heightened tensions between communities and fueled stigmatization of the Syrian population as a source of problems.

Government restrictions aimed at preventing refugees from settling more permanently have hampered the Water, Sanitation and Hygiene response to basic needs, as drinking water supply and latrine emptying services are mainly provided via a poorly regulated trucking system. SOLIDARITÉS INTERNATIONAL's intervention thus forms part of the Water Sector's¹ costly (13 million euros in 2019) and unsustainable (overly dependent on humanitarian aid) strategy.

In order to reduce this dependency, our NGO has been developing alternative solutions. By connecting informal settlements to local water sources, we have provided water access for domestic use (washing, etc.), thereby reducing truck-delivered water needs by 70%. However, since most groundwater is contaminated by domestic and industrial wastewater and chemical farming inputs, the 30,800 people living in these

settlements still rely on delivery trucks for their drinking water supply. To solve this problem, our teams have installed treatment systems wherever they can feasibly reduce truck delivery needs. Since 2017, 18 sites have been fitted out with ultrafiltration systems which treat microbiological contamination while requiring no electricity and little maintenance. All the same, chemical contamination remains an obstacle to wide-scale implementation. This is why, in 2019, we started testing more complex reverse osmosis² treatment systems and, in 2021, will also test an ion exchange system. Given the cost, energy usage and greater maintenance requirements of these technologies, our teams will look into ways to adapt them as alternative solutions to truck-delivered water in informal settlements. These alternatives to delivery would save about 850,000 euros while helping to reduce the vulnerability of these sites.

To address sanitation needs, SOLIDARITÉS INTERNATIONAL has been installing septic tanks wherever conditions allow since 2015, thereby reducing latrine-emptying costs. But questions of cost and sustainability are compounded by health and environmental concerns. The sheer number of sites concerned, their instability (population movements, creation/evacuation of settlements) and government restrictions make it difficult to establish a suitable wastewater management system, particularly for gray water³ most of which gets released back into the environment. In 2019 the government nonetheless began cracking down on municipalities, industries and informal settlements violating wastewater discharge standards. The strategy has entailed prohibiting settlements in certain sensitive areas and enforcing new intervention criteria for NGOs. The Water Sector, in turn, has taken action to reduce eviction risks, thus limiting the associated environmental impact. Since 2019, our NGO has been involved in a pilot project, funded by UNICEF, to develop innovative wastewater treatment systems in informal settlements. The economic crisis and Covid-19 have slowed our progress, but by early 2021, 14 systems will have shown their first results. This year, thanks to the European Union, our teams will also target those informal settlements designated as "priority" by the Water Sector in order to decrease eviction risks and social tensions by reducing wastewater discharge as well as the amount of sewage to be transported to treatment stations.

¹ Lebanon's WASH cluster equivalent
² Fine-filtration water purification system
³ Minimally polluted domestic wastewater



SANITATION INNOVATIONS IN MYANMAR

By **SOLIDARITÉS INTERNATIONAL'S**
Myanmar mission

For the past several years, SOLIDARITÉS INTERNATIONAL has been intervening in Rakhine State to ensure access to water and sanitation for displaced persons in Sittwe camps. Faced with the dramatic scope of needs, our teams have built and are managing an innovative faecal sludge treatment system—the first of its kind in a humanitarian context.

SOLIDARITÉS INTERNATIONAL launched a humanitarian programme in 2013 with Oxfam, ACF, and Save the Children, to respond to the WASH and nutrition needs of forcibly-displaced persons in the restricted Sittwe camps, in Central Rakhine State, Myanmar. A major challenge in these overcrowded camps is to ensure access to safe sanitation for their 87,105 residents. To minimize exposure to major public health risks, our NGO and other WASH partners constructed over 4,000 latrines, and now are in charge of maintaining their functionality, including the desludging, transportation and treatment of faecal sludge from latrine pits with daily volumes of between 18 and 56 m³, which is considered as first priority given the high water table and poor soil infiltration.

SOLIDARITÉS INTERNATIONAL created the Sludge Treatment System (STS) based on the BORDA-conceived DEWATS systems (Decentralised Wastewater Treatments), usually used in developing contexts. The STS consists of a primary treatment by sedimentation and a secondary one with biological processes. It is low cost, works without chemicals or electricity and has low maintenance requirements.

After the STS launch, our team requested the Veolia Foundation's support to implement a monitoring system adapted to local infrastructure and staff skills. This system aimed to ascertain the STS' performance in decreasing pathogens and the possibility of using the final products (dry sludge and effluent) in agriculture. Nearby farmers are in fact requesting liquid effluents to irrigate crops, especially during the dry season.

The Veolia Foundation and our team reviewed the STS to identify the treatment chain parameters requiring testing. In 2018, two Veolia Foundation experts conducted a field visit to set up the testing laboratory with equipment and protocols, and reviewed the STS operation with the first dataset obtained from the analysis¹, in order to maximize performance with existing infrastructure.

Despite the STS' high performance in terms of pathogen reduction, results showed the effluent was not yet usable in agriculture. Additionally, the existing plant proved to have a daily treatment capacity of 30 m³, while Sittwe camps' daily requirements are on average 45 m³. Due to groundwater infiltrations in soakaway pits during the rainy season, these requirements reach 60 m³ daily, to avoid latrine pits overflowing and waterborne diseases spreading.

With these insights, Veolia Foundation renewed its commitment to support our NGO in 2019-2020, and created a model to review each of the STS modules. This then led to the design of the STS' upgrade in two phases: the first to increase the STS' capacity through the extension of the solid line and the piloting of planted drying beds, and the second to review the liquid line to improve the STS' performance and increase the effluent quality to meet agricultural standards.

The construction and management of sanitation infrastructure, particularly of this size and scope, is rare in humanitarian settings. In Myanmar there are few examples of wastewater/sludge treatment plants and the STS in Sittwe camps is the third largest in the country in terms of treatment capacity. In most of Myanmar, untreated sludge is dumped, often in rivers or the sea.

"IT WAS AN EXCITING CHALLENGE FOR US TO ACCOMPANY SOLIDARITÉS INTERNATIONAL IN THIS STS DESIGN REVIEW AND EXTENSION, KEEPING IT SIMPLE AND COST EFFECTIVE FOR THE LOCAL TEAMS."

VEOLIA FOUNDATION

Considering this, our team's work on Faecal Sludge Management is also a means to raise national and local stakeholders' awareness on the importance of safe sanitation in reducing health risks for vulnerable populations in crowded areas and their surroundings, and to influence medium-term national policies supporting the transition from emergency set-ups to early recovery and development programming. As our NGO believes that sanitation issues will one day be part of Myanmar's public services, Humanitarian and Development actors will have to consider these solutions' adaptability to local capacities, evolving context, financial resources and economic model. Only then it will be possible to engage with authorities to take over Faecal Sludge Management services, in order to replicate good practices for urban areas as well.

¹ Analysed parameters are COD, TS, TSS, NH₄⁺, NO₃⁻, P, and E. coli

WATER IS A RIGHT!

A LOOK BACK

By **ÉDITH GUIOCHON**,
ADVOCACY OFFICER, COALITION EAU **AT AN ACTIVE YEAR**

In 2020, Coalition Eau and 30 partner organizations waged an advocacy campaign to lobby the French government and elected officials about the enduring challenges surrounding water and sanitation access in France and around the world. The results were encouraging, but the fight must not stop there.

A PIVOTAL YEAR FOR THE SECTOR

Marking the 10th anniversary of the United Nations' recognition of water and sanitation as human rights, 2020 was a milestone year for the Water, Sanitation and Hygiene (WASH) sector. All the more so in the midst of a global health crisis which dramatically laid bare not only the vital necessity of water but also the injustices associated with it.

2020 was also a year of mobilization, with the launch of the inter-NGO campaign "L'eau est un droit!" ("Water is a right!"). The initiative was spearheaded by Coalition Eau and 30 organizations in an effort to call the French government to action and get local representatives to commit to ambitious policies around water and sanitation access for all, in France and abroad.

POLICYMAKERS: KEY CATALYSTS OF CHANGE

As part of the campaign, NGOs shared their proposals for concrete actions with the government, ministries, members of parliament and even candidates in local elections. Candidates were then invited to sign a *Manifest' eau* (a water Manifesto) including five commitments: install public WASH facilities in public and shared spaces; provide informal settlement zones with connections to running water; instate sliding-scale water pricing to assist the most modest households; allocate 1% of the community water budget to WASH-related decentralized cooperation projects assisting communities in the developing world.

All throughout 2020, we took action to raise awareness and rally others to the cause. An opinion column signed by 40 NGOs was published on Liberation.fr on May 13, 2020 ("COVID-19 and Drinking Water: The State on the Front Line"). A position paper was published on the health crisis and its connections to the WASH sector. We lobbied political candidates and elected officials. We launched the Observatoire du Droit à l'Eau et à l'Assainissement (The Observatory of the Right to Water and Sanitation) in five French cities. And the list goes on.

WHAT'S NEXT?

Notable progress was made in the area of water pricing, with the ratification of the "Commitment and Proximity" Law in December 2019. On top of that, countless communities rallied together during the health crisis to ensure water access for those most in need. The number of representatives ready to join the fight for the right to water and sanitation was also encouraging: 152 local representatives from both Metropolitan and Overseas France signed the *Manifest' eau*, including 52 mayors—Bordeaux, Grenoble, Lille, Lyon, Poitiers, Rennes, Tours, etc.—as well as the president of the Métropole de Lyon (Greater Lyon).

Organizations must stay mobilized to ensure these commitments are followed up with action, including social water policies that are truly social, inclusive and ambitious. Our latest campaign effort, the video *Elu.e.s à l'eau!* ("All Reps in the Water!"), seeks to remind newly elected representatives of these issues and call them to sustained action for the duration of their term.

To achieve universal and sustainable access to water and sanitation (SDG 6) by 2030, a rapid change of political course is necessary. Policymakers must take the plunge and finally commit to making this essential service accessible and affordable for all, including those most in need.



TO LEARN MORE, VISIT THE CAMPAIGN WEBSITE:
LEAUESTUNDRUIT.FR

AN APPEAL TO FRENCH COMMUNITIES FROM SOLIDARITÉS INTERNATIONAL

CITIZENS, ELECTED OFFICIALS: RALLY YOUR COMMUNITY AROUND THE CAUSE OF UNIVERSAL DRINKING WATER ACCESS!

Since its inception 15 years ago, the Oudin-Santini Law allows local authorities and water agencies to provide financial support for international water, sanitation and hygiene projects. If all the entities concerned took action, this could generate 80 to 100 million euros in funding every year, compared with the current figure of 30 million euros.

The UN recognized access to drinking water and sanitation as a Human Right in 2010.

The global Covid-19 pandemic has clearly demonstrated the importance of safe access to water. Yet the sad fact is that 2.2 billion people throughout the world still do not have access to clean drinking water and 4.2 billion lack safe sanitation facilities. Nearly half of those who fall victim to these insanitary living conditions are children under the age of 5, those most vulnerable to waterborne diseases. Women are also particularly badly affected: one in three women worldwide is at risk of being attacked or feeling ashamed because they do not have safe access to toilets.

In 2019, these catastrophic statistics prompted over 170 French local authorities, water groups and water agencies to take action, using the Oudin-Santini Law to fund international development projects aimed at providing sustainable aid to the most vulnerable populations.

Though still underused and lacking in visibility, the Oudin-Santini Law allows French local authorities as well as regional water authorities and agencies to devote up to 1% of their water, sanitation, waste and energy budgets to funding for international humanitarian projects in these sectors. Despite its negligible cost to residents of participating communities, this aid has a considerable, virtuous human impact not only on the beneficiaries of funded projects but also on the funding communities themselves (community-wide mobilization, enhanced awareness of local water resources, etc.).

NGOs: partnering with local authorities to carry out projects.

During the implementation of decentralized cooperation projects, local authorities can share their expertise on integrated water resources management, thus pooling best practices and contributing to capacity building. In parallel, NGOs can provide support for project management and act as an interface between different systems, all the while ensuring that they remain accountable to both beneficiaries and partners throughout their programs.

SOLIDARITÉS INTERNATIONAL wishes to express its deepest gratitude to the local authorities and water agencies that have stood by its side since 1998.

We now call upon other local authorities to join us in this spirit of solidarity, through the 1% solidarity contribution.

"THE FIRST RESPONSE TO HUMAN SUFFERING MUST BE SOLIDARITY"



SOLIDARITÉS INTERNATIONALE'S RECOMMENDATIONS FOR UNIVERSAL ACCESS TO DRINKING WATER AND SANITATION

- 1** Make the 9th World Water Forum (WWF) **an event where key commitments will be made** to achieve SDG Goal 6 —universal and equitable access to drinking water, sanitation and hygiene—by 2030, in preparation for the UN conference on water and sustainable development set to take place in March 2023.
- 2** Reach a **strong final political declaration at the WWF**, supported by both Sahel States and donor countries, to provide practical responses to urgent needs and future challenges, including threats stemming from climate change and their impacts on achieving SDGs 3 and 6 in fragile and degraded contexts.
- 3** Facilitate the participation of local actors and **representatives of the most vulnerable African communities** in the WWF, so that they can express their difficulties regarding access to drinking water and sanitation.
- 4** Make sure that the Forum is of real operational value and has an **impact in the field** by organizing a conference for field operators to highlight complementarity between humanitarian and development activities.
- 5** **Systematically include cross-cutting issues** in water, sanitation and hygiene programs: environment, gender, compliance with protection principles.
- 6** Make the Forum a unique multi-stakeholder platform to **develop expertise in the sector** by enhancing and improving knowledge generation, demonstration skills and innovation.
- 7** To achieve this, use situation analysis frameworks that **investigate both structural causes and short-term factors**, in order to develop scenarios and better adapt our water and sanitation interventions.
- 8** Study, showcase and facilitate the scaling-up of **"low-tech" innovative solutions**, in parallel to "high-tech" solutions, by developing a specific financial mechanism and a transparent **Dakar 2021 accreditation procedure**.
- 9** Reaffirm that universal access to water and sanitation is directly linked to **reducing disastrous epidemics**, as the current health crisis shows.