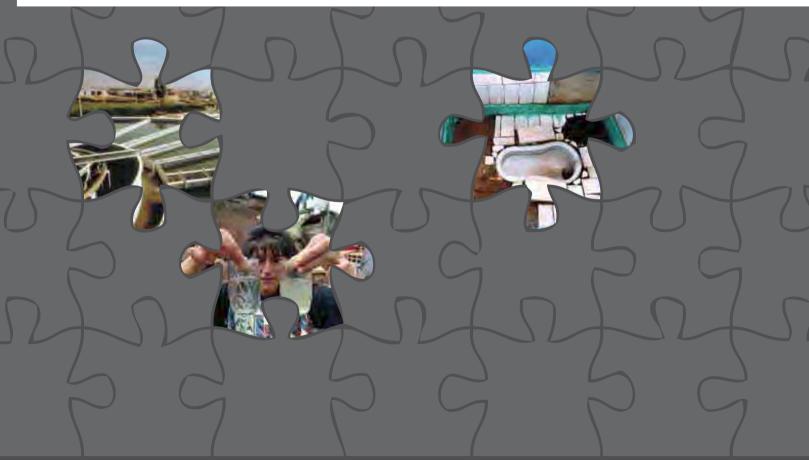
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UN-WATER GLOBAL ANNUAL ASSESSMENT OF SANITATION AND DRINKING-WATER





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THE PUZZLE

According to the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP), 2.5 billion people still remain without improved sanitation facilities and around 900 million people still rely on unimproved drinking-water supplies. Yet diarrhoeal disease is the third leading cause of death from infectious diseases, and in 2004 diarrhoeal disease alone caused more deaths than HIV/AIDS. The majority of these deaths are among children under 5 years of age. Such deaths could be prevented by improving the way we manage sanitation and drinking-water. Although these improvements are achievable, sanitation and drinking-water are not given high enough priorities by several donors and recipient governments alike. Why?

One reason is that it is difficult to make evidence-based policy decisions in the sanitation and drinking-water sectors. For example, although 2008 is the International Year of Sanitation and sanitation presents a huge challenge for the future, it is currently difficult to see what financial resources are available for the sector because sanitation funds are usually lumped together with funding for water supply, water resources management, health care or education. This makes it almost impossible to relate improvements in sanitation service levels to the money spent in the sector. As a consequence, it is difficult to make informed decisions on investment.

If the full picture of the sanitation and drinking-water sector is a puzzle, then service levels (reflected in the coverage figures) are pieces of the puzzle. Other pieces are information on institutional capacity, the policy framework, human resources capacity, and the flows of sector funds together with the capacity to absorb them. An important piece is the capacity to translate all this information into better sanitation and drinking-water services, resulting in healthier and more dignified living conditions, and a more productive working environment.

Numerous activities are currently being undertaken at the global, regional or country level by international organizations, nongovernmental organizations, multilateral agencies and governments to monitor or report on one or more pieces of the puzzle. Each of these efforts provides a perspective on the sanitation and drinking-water sectors. But there is no comprehensive mechanism that allows policy-makers to look at the whole puzzle together and see how the different pieces of the picture change over time.

In this pilot report, UN-Water, through WHO as the agency in charge of developing the GLAAS report, is exploring a new way of presenting a global and all-round picture of the sanitation and drinking-water sectors that will complement the information provided by the WHO/UNICEF JMP reports and by the World Water Development Reports. The uniqueness of this new approach consists in attempting to bring all the pieces of the puzzle together, to see both what is happening in each area and how each of the pieces fits into the global picture.

We hope you will find this document interesting, and that it will stimulate discussion on how to improve the evidence base for policy-making in the sanitation and drinking-water sectors.

Pasquale Steduto Chair UN-Water

Pestedulo

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Acronyms

AfDB African Development Bank Abb Asian Development Bank

AMCOW African Ministers' Council on Water

BMGF The Bill and Melinda Gates Foundation

EC European Commission
ESA External support agency
EU European Union

EUWI European Union Water Initiative

European Union Water initiative

EUWI-AWG European Union Water Initiative — Africa Working Group Food and Agriculture Organization of the United Nations

GBS General budget support

GLAAS Global Annual Assessment of Sanitation and Drinking-

Water

IWRM Integrated water resources management

JMP WHO/UNICEF Joint Monitoring Programme for Water

Supply and Sanitation

MDGsMillennium Development Goals0&MOperation and maintenance0DAOfficial development assistance

OECD Organisation for Economic Co-operation and

Development

OECD – Development Assistance Committee
OECD – DAC CRS
OECD – DAC Creditor Reporting System
UNDP
United Nations Development Programme

UNESCAP United Nations Economic and Social Commission for

Asia and the Pacific

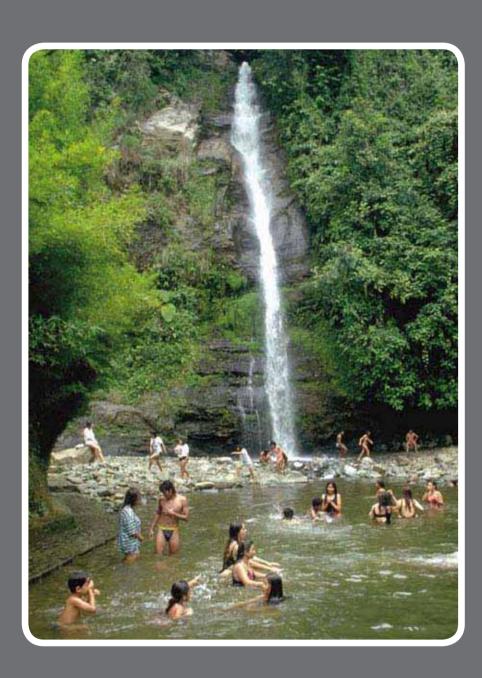
UNESCO United Nations Educational, Scientific and Cultural

Organization

UNICEF United Nations Children's Fund
UNU United Nations University
WHO World Health Organization
WSP Water Sanitation Program
WWDR World Water Development Report

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UN-Water is a mechanism to strengthen co-ordination and coherence among all UN bodies dealing with waterrelated issues, from health to farming, environment to energy, food to climate, and sanitation to disasters. It was set up in 2003, through a decision by the High Level Committee on Programmes (HLCP) of the United Nations Chief Executives Board for Coordination. **UN-Water** evolved from many years of close collaboration among UN agencies and a firm belief that still more can be done to strengthen the UN system in its effort to work more effectively on water and sanitation issues, which are among the most urgent challenges of our time. UN-Water is not another agency. Instead, UN-Water adds value to existing UN programmes and projects and fosters more cooperation and informationsharing among UN agencies and outside partners.



The Global Annual Assessment of Sanitation and Drinking-Water (GLAAS) is a UN-Water pilot initiative technically coordinated by the World Health Organization (WHO). UN-Water GLAAS constitutes a new approach to reporting on progress in the sanitation and drinking-water sectors that aims to strengthen evidence-based policy-making towards and beyond the Millennium Development Goals (MDGs).

The purpose of this GLAAS report is to present the concept of a possible global, periodic, comprehensive reporting mechanism to inform policy-making in the sanitation and drinking-water sectors

The data sources used in this pilot report are the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP), the OECD Development Assistance Committee Creditor Reporting System (OECD-DAC CRS), other United Nations statistics, as well as information specifically collected by GLAAS staff for this pilot study from seven countries and, jointly with the European Union Water Initiative – Africa Working Group, from 25 external support agencies.

The lessons learned from this pilot study are that:

integrated data collection is a complex process for countries, generally requiring extensive coordination among ministries;

only around half the respondents (4 out of 7 pilot countries and 13 out of 25 external support agencies) were able to provide disaggregated financial data for the sanitation and drinking-water sectors;

the sources and levels of contributions to the sanitation and drinking-water sectors from households and the private sector are unknown in most of the pilot countries;

the pilot countries generally do not capture investments in capital maintenance and in operation and maintenance.

The conclusions of this pilot study are the following:

- Integrating information from different relevant sources is a new and useful way to look globally at the sanitation and drinking-water sectors.
- 2. Current data sources are available to support a global periodic comprehensive reporting mechanism, but there are some crucial gaps in information, for example relating to the periodicity and geographical extent of reporting, the level of disaggregation of data, and the comparability of the information presented.
- 3. Countries and external support agencies appear able to provide the missing information on the sanitation and drinking-water sectors, but to do so places heavy demands on their time and resources.
- 4. With further analysis, the overview of the sanitation and drinking-water sectors presented in this pilot report could be used to improve sector indicators of progress towards and beyond the MDGs.
- 5. A global, periodic, comprehensive reporting mechanism, as envisaged in this pilot report, faces great challenges, but at the same time there is a huge potential for such an innovative tool to support evidence-based policy-making in the sanitation and drinking-water sectors.

WHAT IS GLAAS?

The Global Annual Assessment of Sanitation and Drinking-Water (GLAAS) is a UN-Water pilot initiative, technically coordinated by the World Health Organization (WHO). UN-Water GLAAS is seeking a new approach to reporting progress in the sanitation and drinking-water sectors in order to strengthen evidence-based policy-making towards and beyond the Millennium Development Goals (MDGs). The characteristics of such a new reporting approach include:

assessing the capacity of countries and external support agencies to progress and contribute to the attainment of the MDG target to "halve by 2015 the proportion of people without sustainable access to safe drinking-water and basic sanitation";

analysing, on a global scale, the institutional, human resource and financial capacities of countries in relation to status and trends in service levels in the sanitation and drinking-water sectors;

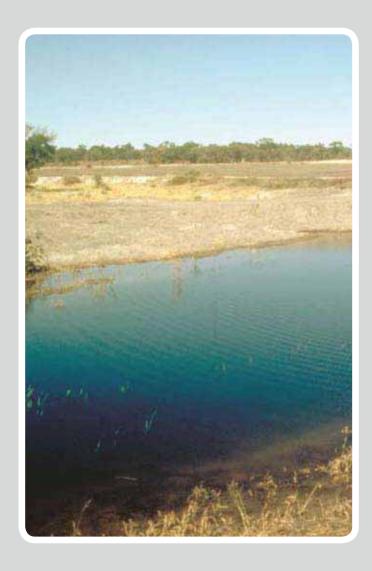
identifying barriers to and drivers for extending and improving service levels in the sanitation and drinkingwater sectors;

recognizing the value of ongoing MDG monitoring initiatives being conducted at various levels within the United Nations system, and by nongovernmental organizations, multilateral agencies and governments;

complementing existing initiatives, such as the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) and the periodic *World water development report*, with a comprehensive global periodic analysis of the sanitation and drinkingwater sectors, bringing together national, regional and global data (for example, from OECD, the World Bank, national agencies, and bilateral and multilateral donors);

supporting evidence-based policy-making on the sanitation and drinking-water sectors, at national, regional and global levels.

UN-Water GLAAS aims to decrease the reporting burden of countries and external support agencies and to help in harmonizing their different reporting mechanisms. By so doing, UN-Water GLAAS would increase the comprehensiveness and accountability of information in the sanitation and drinking-water sectors.



PURPOSE OF THIS PILOT REPORT



"The Millennium Development Goals (MDGs) provide a universal framework for developing countries and their development partners to work together in pursuit of a shared future for all" *Ban Ki-moon, Secretary-General, United Nations, Millennium Development Goals Report 2007*

The purpose of this UN-Water GLAAS pilot report is to present the concept of a possible global, periodic, comprehensive reporting mechanism to inform policymaking in the sanitation and drinking-water sectors.

The specific objectives of this pilot report are to:

- present an all-round view of the sanitation and drinking-water sectors by collecting information on country capacities, national financing and external aid priorities, and by analysing it together with relevant information from other sources, such as JMP, OECD or UN statistics;
- assess the adequacy of current data sources in the sanitation and drinking-water sectors for use in global periodic reporting;
- (3) assess the ability of countries and external support agencies to compile institutional and financial data in the sanitation and drinking-water sectors for use in periodic sector reporting;
- stimulate discussion on the development of better indicators to monitor progress in the sanitation and drinking-water sectors;
- (5) show lessons learned and recommend a way forward to the possible establishment of a global periodic comprehensive reporting mechanism on the sanitation and drinking-water sectors.



A word on hygiene

Hygiene promotion and education are essential to achieve the health gains associated with improvements in basic coverage and increased service levels of sanitation and drinking-water. In this pilot study we consider hygiene as an important component of the "software" part of sanitation and drinking-water projects.

USING AVAILABLE INFORMATION

As far as possible, in order to avoid duplicating efforts, GLAAS uses data that have already been collected and analysed. There are several sources of information that GLAAS could draw on to produce a comprehensive global periodic assessment of the sanitation and drinking-water sectors. The main sources are listed below.

Ongoing monitoring:

The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) is the official United Nations mechanism to monitor the sanitation and drinking-water MDG target. It reports biennially on estimated national coverage levels for sanitation and drinking-water. The JMP report uses current and historical in-country household surveys to determine coverage trends and to statistically extrapolate coverage levels for the reported data year where needed. Coverage levels are disaggregated between sanitation and drinking-water, and between urban and rural coverage.

The Organisation for Economic Co-operation and Development (OECD) collects aid activity data from bilateral (22 countries) and multilateral (16 agencies or international banks) donors. The Creditor Reporting System (CRS) database is accessible online and currently provides data on aid activity from 1973 to 2006. Financial data on grant and loan commitments and disbursements for the sanitation and water sectors are reported at the project level. Some of the data are incomplete because multilateral donors are not required to report, and several multilateral agencies do not report disbursements to the system. The system currently does not disaggregate between sanitation and drinking-water aid.¹

The United Nations World water development report, published every three years (UN-Water, 2003, 2006), provides an overall picture of the state of the world's water resources. It summarizes, at a global level, the status of water resources as they relate to healthy ecosystems, water quality, drinking-water supply, sanitation access, agriculture, natural disasters, industry, energy, and value (financing).

Examples of past reports that deal with capacity in the sanitation and drinking-water sectors:

Getting Africa on track to meet the MDGs on water and sanitation: a status overview of sixteen African countries, published in 2006 by the Water Sanitation Program, reports on progress in coverage and sector investment, sector preparedness (national strategies, institutional arrangements, sector financing) and overall sector sustainability (African Ministers' Council on Water et al., 2006).

Asia water watch 2015: are countries in Asia on track to meet Target 10 of the Millennium Development Goals, published in 2005 by the Asian Development Bank (ADB), discusses progress and prospects in the sanitation and drinking-water sectors in Asia (ADB et al., 2005). The report estimates the costs of meeting the sanitation and drinking-water MDG target, discusses challenges and recommends ways of improving progress in the sanitation and drinking-water sectors.

Water supply and sanitation sector assessment, published in 2000 by the WHO Regional Office for Africa, gives the results of an assessment of the sanitation and water supply sectors in the WHO African Region (WHO Regional Office for Africa, 2000). It is based on data collected in the countries of the region during 1999. The report assesses the status of coverage, costs and investments in the sectors, as well as policy, planning and institutional responsibilities, and the capacity for future development.

In order to increase sector transparency and gain a better understanding of financial aid flows, UN-Water is working with several OECD member states and the European Union Water Initiative – Africa Working Group (EUWI–AWG) to propose an amended coding system so that expenditures on sanitation, hygiene and drinkingwater can be disaggregated in the OECD DAC–CRS database.

SEEKING SUPPLEMENTARY DATA

A review of current data sources showed that there was a need to collect additional data to fill in gaps. Working with a group of countries and external support agencies, and in collaboration with the European Union Water Initiative – Africa Working Group (EUWI–AWG), GLAAS staff developed three pilot survey questionnaires – two for countries (one on sanitation and hygiene, and one on drinking-water), and one for external support agencies – along with notes on the terminology used (Appendix A). For the survey questionnaires and associated guidance notes, see www.who.int/water_sanitation_health/glaas.

Following discussions with WHO regional offices and with EUWI–AWG, questionnaires were sent to 32 countries and 56 external support agencies potentially interested in participating in the pilot study. A total of seven countries (Ghana, Kazakhstan, Madagascar, Mongolia, Nepal, Uganda, Viet Nam) and 25 external support responded. At least ten additional countries and a number of external support agencies regretted not being able to participate in the pilot study, but expressed an interest in taking part in any future such initiative. Responses were reviewed for internal consistency and completeness. In cases of doubt about the information provided, respondents were asked to provide clarification. A summary of data provided by countries and external support agencies can be found in Appendices B, C and D.

Collaboration with the European Union Water Initiative Africa Working Group

UN-Water GLAAS and the European Union Water Initiative – Africa Working Group (EUWI–AWG) collaborated to develop the pilot survey method, collect data and interpret results. EUWI–AWG has designed an aid mapping tool to assess the composition of European development aid to the sanitation and hygiene, water supply, and integrated water resources management sectors in Africa. Thus, information was collected from external support agencies in EU Member States by EUWI–AWG, using the aid mapping tool (for findings, see EUWI–AWG, 2008). For reasons of consistency and comparability, the same questionnaire was used by UN-Water GLAAS to collect information from the other external support agencies that participated in the pilot study.



DIFFICULTIES IN COLLECTING DATA

One of the major difficulties in producing this GLAAS pilot report was identifying the final list of pilot countries and external support agencies to engage in the survey monitoring exercise. Even so, some respondents felt that more time and internal discussion (for example, a workshop) were needed to provide the best snapshots of sector status within their country.

The questionnaire for external support agencies was similarly resource intensive to complete. In a majority of cases, several people had to provide input, and the form required on average one week to complete. Several respondents mentioned the difficulties they faced in attempting to obtain the requested information. These difficulties arose because it is:

difficult to attribute aid funding to the sanitation and drinking-water sectors when that funding is hidden in other sectors (such as education, agriculture or health) or when aid funds are directed to general budget support;

difficult or impossible to disaggregate data between the sanitation and drinking-water sectors because the two sectors are usually combined in the same projects or programmes, and data are generally maintained to meet OECD guidelines (which do not require separate reporting of data for the two sectors).

ESTIMATING FINANCIAL FLOWS

The country responses on financial flows are presented in Appendices B and C, the responses of external support agencies are presented in Appendix D. Country and external support agency respondents were allowed to select their most recent data year to report financial flows. This flexibility led to a range of years being reported (from 2005 to 2007). For illustrative purposes, in this GLAAS pilot report, data were aggregated and recorded as "most recent data year". Where financial information is presented that amalgamates data for several years, the 2005 constant US dollar has been used.

ESTIMATING CAPACITY

Countries were asked to estimate the capacity of their human resources, and their institutional and financial systems. In an attempt to reduce the subjectivity of responses to these questions relating to capacity, the GLAAS pilot study team provided guidance on capacity assessment (Appendix E).

SERVICE LEVEL COVERAGE STATUS

All responding countries provided country coverage data for both the sanitation (Appendix B) and drinking-water (Appendix C) sectors. In the many cases, country estimates differed from JMP estimates. These different estimates are a result of different definitions for coverage and different methods for collecting and analysing data. In this pilot report, the JMP coverage numbers (which are available for 1990 to 2006) are used to show trends over time.

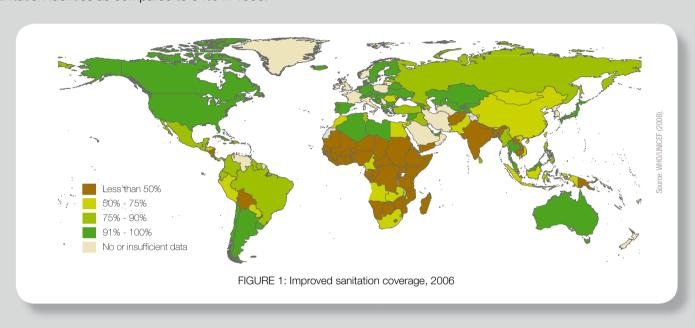


BASELINE FOR THE PILOT STUDY

The GLAAS pilot study took place in the context of the known status of the sanitation sector (Figure 1) and the drinking-water sector (Figure 2).

SANITATION SECTOR STATUS

From 1990 to 2006, approximately 1.12 billion people gained access to improved sanitation. Despite this considerable progress, the world is not on track to meet the MDG sanitation target by 2015. Only 62% of the world uses improved sanitation facilities as compared to 54% in 1990.



DRINKING-WATER SECTOR STATUS

From 1990 to 2006, approximately 1.56 billion people gained access to improved drinking-water sources. Currently 87% of the world uses drinking-water from improved sources, as compared to 77% in 1990. While the world is on track to meet the MDG drinking-water supply target by 2015 at the global level, many countries in sub-Saharan Africa and in Oceania are currently projected to miss MDG country targets, leaving significant portions of the population without access to improved drinking-water supplies.

