People, systems and change

Harnessing the power of collective action through the Safe Water Strategy
This synthesis document shares the story and lessons learned, so far, from collective action by organisations supported by the Conrad N. Hilton Foundation's Safe Water Strategy. Together, we are strengthening the systems needed to deliver safe water, sanitation and hygiene services to all households, health care facilities and schools within our 11 partner districts in Burkina Faso, Ethiopia, Ghana, Mali, Niger and Uganda by 2030 and forever. While our collective action takes place at district level, our goal is to inspire replication and wider impact. This note is part of a set of advocacy and outreach materials designed to ensure that what we learn is shared and adopted in more districts in the countries where we work, and in other countries. Read them all here https://www.ircwash.org/resources/working-together-safe-water-journey-so-far

AUTHORS:
Patrick Moriarty, Laura Brunson, Ingeborg Krukkert, and Sára Bori

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THE STORY OF THE COVER PHOTO
Meet Helena Acquah, Head of the Physical Planning Department and Barima Dankwa Osiakwan, traditional council leader. This moment was captured at a District Level Learning Alliance Platform meeting on gender empowerment at the Asutifi North District Assembly, Ghana in 2019. During the meeting learning alliance members, including local government, civil society, traditional authorities and international NGO representatives, discussed activities they could jointly work on to address systemic barriers to gender empowerment in the district. Read more about their recommendations and the related study here. https://www.ircwash.org/resources/measuring-empowerment-wash-policy-brief-ghana

MEASURING PROGRESS IS COMPLICATED
In this brief we use the definitions of the WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation, and Hygiene (JMP) to assess the quality of services that people are receiving and to set targets for the future. The JMP identifies a service ladder whose rungs consist of five distinct service levels: surface water; unimproved; limited; basic; and, safely managed. Like the JMP, we use a combination of household surveys, infrastructure, water quality, and administrative data to estimate the proportion of the population being served at each level. Criteria including technology type, protection from contaminants, distance from home and availability.

Each level up from ‘surface water’ represents a significant improvement in the safety and security of the supply. The same logic applies to sanitation, hygiene, and services in schools and health care facilities. A safer water supply can be achieved by using infrastructure that guards against contamination (e.g. a deep mechanised borehole or a piped scheme instead of an open well or stream); using water treatment technology (e.g. in a piped scheme or chlorination at a point source); or reducing the distance and time between the point of collection and the point of use (in turn reducing both the risk of recontamination, and the burden and risks of long trips to the water point).

We are driving progress towards universal access to safe services, and eventually ‘safely managed’ services by using a variety of context-appropriate strategies. These include bringing piped water to more households, protecting and disinfecting community water points, and promoting better household storage and treatment practices.

The JMP definitions do not always match perfectly to national norms and standards. In particular, there is considerable disagreement about what constitutes ‘safe’ water. Despite this, we believe that for consistency and ease of comparison across countries and programmes, it makes sense to use JMP wherever possible. For more information on the JMP methodology, go to https://washdata.org/monitoring/methods.
Introduction

Changing the conversation

When the Sustainable Development Goals launched in 2015, the water, sanitation and hygiene sector faced a challenge. The sector was preoccupied with installing pumps, pipes and toilets. People seldom paused to ask if these were delivering the desired results: in fact, they weren’t. At any given time, 30% of infrastructure for rural water supply in Africa wasn’t working. What’s more, much of the water being consumed wasn’t safe to drink.

People started to realise that the conversation had to change, if we were to have any chance of meeting the ambitious sustainable development goal for water and sanitation (SDG 6). People had to believe that getting safe water to everyone means strengthening the systems that deliver those services: not just infrastructure, but also the people, partnerships, incentives, laws and policies that make it work.

The Conrad N. Hilton Foundation grasped this early on. Its Safe Water Strategy (2017–21) initiated a new, ambitious approach: government leadership at all levels, service delivery models that are innovative and can be scaled, adequate funding targeted to supporting district-level systems change through government leadership and coordination of multi-sector partnerships. These partnerships explore and demonstrate service delivery models that are innovative, can be sustained locally and scaled nationally and globally.

This approach – systems strengthening through collective action – was based on evidence. IRC, the Millennium Water Alliance and their partners had built up a body of real-world know-how and experience, tried-and-tested practices and robust emerging evidence generated over a decade of investments. The Strategy and support from the Foundation would allow them to advance and accelerate this work.

Three years in, and the signs are good. The need for this Strategy is urgent. We have fewer than 10 years left to achieve SDG 6 yet the world is still badly off track. Extending this approach and multiplying its impacts is more important than ever.

1 SDG 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all. For all SDG 6 targets visit https://sdgs.un.org/goals/goal6
What are we achieving?

Since 2017, we - the Safe Water Strategy partnership - have accelerated access to safe water in our partner districts in six countries: Burkina Faso, Ethiopia, Ghana, Mali, Niger and Uganda, a combined population of 2 million people.

By 2030, our goal is that at least 1.24 million people will have sustainable access to basic and 760,000 people to safely managed services. All schools and healthcare facilities in partner districts in these countries will have access to basic services. Lessons learned will be adopted nationally, and globally, through our knowledge sharing and advocacy.

We’re making strong and accelerating progress. In the last three years, as a result of our collective action:

- **11 districts** have created visionary master plans that set out how they will achieve their goals by 2030
- Over US$ 18 million have been raised towards implementing the first phase of the master plans
- **At least 30,000 people** now have a safely managed water supply – who didn’t previously
- **At least 100,000 people** now have a basic household supply – who didn’t previously
- Over 171 schools and 55 health facilities now have upgraded water, sanitation and hygiene services
- In Wassa East, Ghana, **34,000 people** have an at least basic water supply - who didn’t previously.

We’re providing investment in improving services; strengthening people’s ability to plan and coordinate; and brokering deals for new partners to come on board.

When faced with the challenge of COVID-19, the wider partnerships we’ve created have helped our district partners to respond effectively, spreading health messages and strengthening the skills of health facility staff.

**HOW ARE WE SCALING THIS APPROACH?**

This is only the start. With growing proof of concept, we’re moving beyond our original partner districts. National government planning agencies in Uganda and Ghana have expressed interest in adopting master plans as a way to bring people together around a shared vision and goals. In Burkina Faso the national public water utility, ONEA, is developing master plans in at least five new districts.

Since 2017 we’ve shown what concerted action by a multi-skilled partnership can do, when allied with strong and committed local leadership. We’re now committed to expanding that work, while continuing to support our partner districts to deliver on their vision of universal access.

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2 Based on the district level partnership implementation tracking

3 Numbers based on combination of household and facility data available from district level partnership implementation tracking. Estimates of additional people served with basic services include data from Burkina Faso, Ethiopia, Uganda, and Ghana (Asutifi North), and estimates for safely managed include Ghana (Asutifi North) and Uganda.
Systems strengthening through collective action

We understand that in the end, it is people who provide safe water to people. Government leadership, supported by a coalition of partners, and coordinated by a hub, is at the heart of achieving SDG 6 in our partner districts.

Political buy-in and collective action are essential to addressing the world’s hardest challenges, because success relies on many different people and organisations – from service users to local utility managers – all delivering their part.

We need everyone involved to buy into a common path focused on systems strengthening. That’s why we develop and work towards a shared vision, backed up with goals and a plan. We build trust and cooperation, and recognise each other’s unique contribution and value.

International partners (largely International Non-Governmental Organisations, social enterprises and funders) take on responsibilities such as investment and technical support in water safety, behaviour change and assessing and improving WASH facilities for households, schools and health care facilities. The majority of these organisations are grantees of the Conrad N. Hilton Foundation, however Safe Water Strategy partners are also continuously bringing in new partners (local and international) to address gaps in the implementation of the master plans.

These partnerships are convened by IRC in five countries*, and the Millennium Water Alliance (MWA) in Ethiopia. They act as a hub or ‘backbone’ to each partnership and help local leaders to lead and coordinate partners. They facilitate relationships, provide expertise and monitoring, help share learning and ensure continuous communication among partners.

Promoting (district) government leadership and collaborative partnership is at the heart of our approach (see page 18–21 for details).

National, regional and district partners (from governments to private sector providers) take on a range of roles including delivering parts of the master plans and holding each other to account.

*In Mali and Niger, the early focus of IRC has been providing technical support to local government, as part of the partnership with World Vision and their ongoing work to improve WASH planning and service delivery. As the partnership matures, collective action is building and the role of IRC as a hub is emerging.
High level master plans* in the 11 districts set out the goals, actions and timescales, and provide clarity, confidence and momentum. The plans have enabled people to:

- demonstrate political commitment to water, sanitation and hygiene
- create a concrete vision of what it really takes to achieve SDG 6 in a district
- attract funding and partnerships for strong and resilient systems and services that last
- increase investment in the right places – infrastructure, organisations and people – as well as developing markets for water, sanitation and hygiene services
- link government policies, institutions, monitoring systems and management processes in ways that will improve water, sanitation, health, agriculture, economic development, education, energy, and environment
- improve technical expertise and knowledge about what works – and share, grow and use this expertise systematically in policy and practice (including regulation)

*About master plans
Master plans are owned by our local government partners and guide our district work. Each one contains a statement of a shared vision and political commitment. They describe the current state of provision of services, highlight gaps, identify priorities and outline (in broad terms) how to fill those gaps to achieve the vision of everyone being served with water and sanitation by 2030.
CASE STUDIES

BURKINA FASO: Banfora – a catalyst for change in 93 communes

“Our vision is clear. In 2030, our dynamic communal governance will make Banfora the standard in terms of access to sustainable drinking water and sanitation services everywhere, for everyone and at any time. We want Banfora to become a reference for national level and even beyond.”

M. Aboubakar Héma
Mayor of Banfora

In 2018, IRC supported Banfora commune Mayor Aboubakar Héma and his team to develop a master plan to deliver WASH services to everyone in the commune (district), from a baseline of 154,000 people in 2017, to 235,000 by 2030.

Today, there is a communal WASH department funded from commune budgets, and a partnership supporting the commune with this ambitious vision.

Partners meet frequently, convened by the commune, supported by the hub, to coordinate updates on progress and learning. They have now carried out three annual and two mid-term reviews.

WASH interventions are planned and coordinated more effectively, leading to 59,000 people who now have access to basic and an estimated 50,000* to safely managed services. And importantly, 62 schools and 17 health care facilities in Banfora now have access to basic services.

Banfora’s COVID-19 response plan was an important moment for collective action. Led by the Mayor’s office, it brought the partners together in a united effort to align activities and mobilise funding.

The political leadership shown by the commune has already inspired other organisations and funders to join the partnership. Importantly, it has led to a stronger relationship with the national public water utility, ONEA, which is using the master plan to prioritise investment in the district.

The European Union is now supporting ONEA and IRC to adopt elements of the Banfora approach in 93 more communes, and to develop full master plans in at least five of them.

* In 2017, monitoring in Banfora did not differentiate between basic and safely managed services, so while the performance data of ONEA suggests significant progress in the past 2 years, it is unknown how many new people have been reached with safely managed services since 2017.
National partners include the Mayor’s office; the Ministry of Health, the Ministry of National Education and the Ministry of Water and Sanitation; ONEA; and Espace Culturel Gambidi (ECG). International partners are the Conrad N. Hilton Foundation, the One Drop Foundation, charity: water, Centers for Disease Control and Prevention, Catholic Relief Services, Danida, IRC, KfW and Water 4.
CASE STUDIES

GHANA: Asutifi North – the power of citizens’ voice to drive action for WASH

“I am very impressed with how intensive community sensitisation and engagement through the ANAM WASH radio programme has empowered communities to know that water is their right.”

Suglo Ibrahim, Monitoring and Evaluation Officer, World Vision Ghana

In Asutifi North district, the partnership is supporting District Chief Executive Officer Anthony Mensah and his team to deliver the Asutifi North Ahonidie Mpontuo (ANAM) initiative. ANAM stands for clean Asutifi North in the local Twi language. This bold initiative is based on a master plan developed in 2018 and aims to deliver safe water and safely managed sanitation to everyone in the district – 63,000 people in 2017, projected to grow to 84,000 by 2030.

A network of citizens and traditional leaders brings broad-based popular support and innovation to the ANAM initiative. This is backed by a website and social media channels providing regular updates, a monthly programme on the local Radio Anapua FM with active citizen interaction and a WASH help desk at the District Assembly office which was launched in 2019.

The WASH help desk has quickly become a space for citizens to raise issues about water services. By October 2020, 204 complaints had been received and 150 resolved.

In 2019, the District Assembly doubled their WASH budget and new partners are continuously joining the initiative to address gaps in the implementation of the master plan. By 2020, an estimated 11,500 people had experienced some level of water service improvement. This includes 7,000 people getting to safely managed services and 4,500 people getting to basic water services. A total number of 52,000 people now have at least basic water services in the district.

Progress has been rapid, visible and impactful: thanks to engaged citizens,

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dedicated local leadership, well-aligned international partners with diverse and complementary responsibilities, as well as the district’s relatively small size and compact geography.

There is a real potential to scale from the lessons being learned. The National Development Planning Commission – a national government agency with the mandate to advise the President on development planning policy and strategy – has published the successes in a booklet, and intends to share the lessons in a WASH toolkit. This will help embed lessons in their national planning process and pilot the master planning process in all of Ghana’s sixteen regions.

For booklet, see: https://www.ircwash.org/resources/good-practice-wash-ghana-meeting-targets-water-sanitation-and-hygiene-2030

ANAM partners celebrating the start of the master plan’s implementation phase in 2019.
CASE STUDIES

UGANDA: Kabarole district – Covid-19 response proves the strength of health care partnerships

“By the time we had the first case of COVID-19 in the country … all facilities within the district had alcohol-based hand sanitisers and also behaviours around hand hygiene had greatly improved.”

Tusabe Fred, Medical Laboratory Technologist – IDI

In Kabarole district, the partnership\(^9\) is supporting Hon. Richard Rwabuhinga, Chairperson of the district to achieve the vision of reaching everyone with at least basic water services – 325,000 people in 2017 expected to grow to 441,000 people by 2030.

Together, they have developed a WASH master plan. There is strong will from different organisations to support the district, and new partners are joining the partnership and taking on underfunded aspects of the plan.

One priority is to ensure that all health care facilities have adequate water, sanitation and hygiene services. In 2019, only 65% had access to basic water, 38% to basic sanitation and 5% to basic hygiene services\(^9\).

Together with the Centers for Disease Control and Prevention (CDC) and the Infectious Diseases Institute (IDI), partners have been implementing a new system for producing alcohol-based hand sanitisers locally. As a result, 30 health care facilities within the district now have access to hand sanitisers, and hand hygiene adherence has increased from 5% in 2018 to 25% in 2020.

As in other countries, strong leadership shown by the district, coupled with work at the health care facilities has meant that the district has been able to react quickly and effectively to the COVID-19 crisis. Partners have mobilised funds and are bringing in new collaborators, such as PATH, focusing on chlorine generators in health care facilities. IRC has worked with the local Hand Pump Mechanics Association to renovate toilets in 12 health care facilities, which now meet WHO standards.

Together, the District Health Officer, IDI, Baylor College of Medicine and Children’s Foundation Uganda, and IRC Uganda pooled resources to provide personal protective equipment for health workers in Kabarole. This substantially reduced chances of health care workers transmitting COVID-19 and other diseases.

There is growing interest and understanding in the district around the unique features that make WASH safe and sustainable in health care facilities. At a recent meeting, local government and partners developed a joint plan to further improve WASH in health care facilities including joint campaigning. The District Health Officer, the District Health Inspector and IRC are now working together to have low-cost incinerators constructed.

Read more stories and statistics in detailed country briefs at: www.ircwash.org/resources/working-together-safe-water-journey-so-far

National partners include Kabarole and Bunyangabu District local governments; National Water and Sewerage Corporation; Mid-Western Umbrella for Water and Sanitation; Hand Pump Mechanics Association; Ministry of Health; Ministry of Water and Environment; Uganda Water and Sanitation Network. International partners are the Conrad N. Hilton Foundation, Aquaya Institute, Centers for Disease Control and Prevention, Infectious Diseases Institute, IRC, Water.org and Water and Sanitation for the Urban Poor (WSUP).
What we’re learning...

... ABOUT COLLECTIVE ACTION

• **Local political leadership is crucial.**
  Local government has the legitimacy that’s needed to coordinate and lead other local actors. Helping them to build their leadership skills, in areas such as planning and budgeting, monitoring and communication, allows leaders to fulfil their mandate.

• **Equally important is the commitment of those who provide water services.**
  While local government leadership is key, water services are provided by a mix of public, private and community organisations. Some of these are large-scale public utility companies serving many districts, while others are private businesses that serve specific market segments. Supporting districts to engage with these actors is essential to success.

• **Master plans provide a shared vision and the basis for action.**
  The plans and the processes that lead to their development help establish leadership and make sure everyone understands the part they must play in achieving the shared vision.

• **Collective action is a catalyst for change.**
  Local government can, and must, lead. But it needs support. In the short to medium-term this can be external – that’s why this programme exists. In the longer term it must become localised and involve a range of partners.

• **Hubs make collective action effective.**
  A hub helps bring everyone together – from government to funders to users of services – and supports collective action. It makes sure that knowledge and information is shared among partners, and links different parts of the system that may otherwise operate as isolated silos.

• **Different districts require different entry points.**
  Asutifi North in Ghana and Torodi in Niger have very different levels of wealth and development. Focusing on health centres as a first step to building confidence makes sense in Torodi. Focusing on access for everyone makes sense in Asutifi.

... ABOUT WATER SERVICES

• **Professional service provision is key.**
  In the past, the focus was on community managed water services in small towns and rural areas, supported by local government. These services were too often of poor quality and unsafe. Ghana, Uganda and Ethiopia are now moving towards professional, publicly owned utilities in these areas. In Uganda and Burkina Faso the national public utility is also starting to operate within the district. Such public utilities offer the scale and professionalism needed for universal access. Where permitted, professionally managed private enterprises – such as Water4 and Safe Water Network in Ghana – can also provide services.
to those willing and able to pay. Either solution allows the district to channel its scarce resources towards those who need them most, i.e. the very poor, or those who live in remote and underserved communities.

- **Rural water supply is chronically underfunded.** Master plans help people to develop a realistic understanding of what resources are needed. They then direct money and materials to where they are most needed. Quick wins can be made through coordination between cash-starved districts and public utilities with access to finance. But if these plans are to scale, they need to be clearly linked to reliable national funding channels.

- **Progress is fastest and most visible in the smallest districts** where the concentration of external actors and the resources that they bring are sufficient to serve everyone.

- **Bridging the gap between ‘basic’ and ‘safely managed’ services requires intermediate solutions to make basic supplies ‘safe’.** According to the global benchmark set by the Joint Monitoring Programme (JMP), a safely managed supply is one that is treated, pressurised and delivered to a tap in a person’s house. This is an aim we all aspire to. Yet the reality is, that by 2030 hundreds of millions will still rely on sources that are not safely managed. These are predominantly, various types of improved shared ‘point sources’: handpumps, shared taps and so on that deliver a basic service. We need to improve these basic services – for example through chlorination at the water point, or improved behaviours around household storage and usage.

- **As we close in on universal basic access, equity becomes a challenge (and also within reach).** When 50% of a district lacks access to a basic, let alone safely managed service, trying to focus on the poorest or most marginalised is a challenge. Yet when we are closer to achieving at least basic services for the majority, it creates the space to focus on those who remain unserved. What’s more, where services to the better off are paid for through adequate tariffs, scarce public money can be channelled to those least able to pay.
Our next priorities – reach, scale and impact

Change is happening. Systems are being strengthened through collective action. This is changing the way people think about the problem, and how they act to solve it. It is galvanising local movements for change, increasing coordination, and building capabilities. If this work continues, we can ensure that the 2 million people in our partner districts have a better water supply at home, in their health care facilities and in schools. And demonstrate an approach of value to the world.

We are learning that there are no easy answers or shortcuts to the methodical, complex and unglamorous work of systems strengthening and improving service delivery. It takes time, because it takes people in all parts of the system working together, to make change happen.

Yet there are ways of accelerating progress. The Safe Water Strategy is helping us to pinpoint these and act on them. While we don’t have all the answers, this model is already beginning to scale – as we’ve seen in Burkina Faso and Ghana.

Our leadership challenge now is to capitalise on the momentum and achieve greater reach, scale and impact: to spread the power of these solutions to other districts in the countries where we are working, and to other countries across the world. Based on growing evidence, we can now show people what’s possible, inspire them to think differently, and mobilise them to act. We can challenge the status quo that is leaving over 2 billion people without their human right to safe and reliable water services. We’ve set the wheels in motion and SDG 6 is within reach: systems strengthening through collective action can get us there.
Find out more about the work

1. For country briefs with detailed stories and updates on statistical data for Burkina Faso, Ethiopia, Ghana, Mali, Niger and Uganda visit https://www.ircwash.org/resources/working-together-safe-water-journey-so-far
2. For the water, sanitation and hygiene (WASH) master plans of Burkina Faso, Ghana and Uganda visit https://www.ircwash.org/resources/water-sanitation-and-hygiene-wash-master-plans
3. Visit the IRC - Collective action for district wide services - project website to read more https://www.ircwash.org/projects/collective-action-district-wide-WASH
4. For more Millennium Water Alliances resources visit https://mwawater.org/resources/more-resources/
5. For videos on master plans, hubs and political leadership visit the ‘Strong WASH systems’ series at https://www.youtube.com/user/ircwater
6. The ANAM initiative in Ghana has its own website with hub updates and more https://www.anamwash.com/
Who we are and what we do?

**National, regional and district level organisations** such as local government; national agencies responsible for water, education, health, finance/tax and environment; national and rural public and private sector utilities which provide WASH services and improve water quality; civil society actors such as grassroots NGOs or local leaders.

*These provide local leadership to inspire and drive change; bring about practical changes in service delivery; share their learning to improve systems and services; help identify those who lack safe water and sanitation; and hold to account the people and organisations with the power to effect change.*

Local governments in the partnership include the Mayor’s office in Banfora, Burkina Faso; Nossombougou, Ouologo, Tioribougou in Mali; Makalondi and Torodi in Niger; woreda leadership in Dera, Farta and North Mecha, Ethiopia; Asutifi North and Wassa East District Assemblies in Ghana and Kabarole district local government in Uganda.

We work with regional and national government agencies, like the National Development Planning Commission in Ghana or the regional government of the National Regional State of Amhara in Ethiopia.

We also work with utilities, such as the Mid-Western Umbrella in Uganda or the Office National de l’Eau et de l’Assainissement (ONEA – National Utility) in Burkina Faso and local NGOs such as Espace Culturel Gambidi, also in Burkina Faso. For more detail on all national, regional and district partners read our country briefs at [https://www.ircwash.org/resources/working-together-safe-water-journey-so-far](https://www.ircwash.org/resources/working-together-safe-water-journey-so-far)

**International organisations** including those involved in humanitarian action and development, water safety, public health, philanthropy and investment, WASH systems, advocacy and influence, accelerated learning, WASH services, behaviour change, monitoring and evaluation.

*Their extensive and wide-ranging expertise acts as a catalyst for change. They bring powerful influence and networks to bear in districts; new ideas, experiences and energy to partnerships; and district experiences into advocacy and influencing at national and international levels.*

**The international partners are:**

**Aquaya Institute:** a US-based global leader in research and evidence-based action around water safety management. It works in Ghana and Uganda to understand how to make water services more financially sustainable and safer at the point of collection.

**CARE:** a global humanitarian and development organisation. In the Ethiopia partnership, CARE serves multiple roles, including technical lead for capacity development and governance.
Catholic Relief Services (CRS): a global humanitarian and development organisation. In Burkina Faso, Ethiopia and Mali it is focused on supporting clean water in health care centres.

The Centers for Disease Control and Prevention (CDC): the national public health agency of the US and a global public health leader. It supports evaluation and learning, particularly to support baseline, midline and endline assessments of WASH services in health care facilities.

The Conrad N. Hilton Foundation: a leading US-based philanthropy organisation that provides financial and technical support to address a wide range of social problems, including safe water services in sub-Saharan Africa.

Food for the Hungry: an international organisation that serves the most vulnerable people on earth through relief and development programmes. In the Amhara region of Ethiopia, it is working in low-resource communities, schools, and health care facilities to increase access to clean water and improved sanitation and hygiene services.

IRC: a Dutch-based champion of ‘systems thinking’ within WASH. Its nationally led country programmes have been testing and developing the collective action and systems strengthening approach for the last decade. It now acts as the ‘backbone’ or hub organisation for the partnerships, and provides advisory support to district government to build its capacity to bring about systems change.

Millennium Water Alliance (MWA): a US-based permanent alliance of WASH organisations focused on convening, influencing and accelerating learning and progress in the sector. In Ethiopia, a consortium of MWA members and partners is supporting the programme, with the MWA acting as the backbone organisation for the partnerships.

Netcentric Campaigns: a US-based expert in building local networks that drive change. It is supporting the work in Ghana.

One Drop: an international foundation created by Cirque du Soleil founder Guy Laliberté. Together with partners, One Drop deploys its unique Social Art for Behaviour Change™ approach to promote the adoption of healthy WASH-related behaviours and empower communities. In Burkina Faso, One Drop is funding its local partner Espace Culturel Gambidi (ECG) to address access to safe and inclusive WASH in Banfora commune’s health care facilities.
PATH: a global non-profit which improves public health. It is piloting an already commercialised on-site chlorine generator (Aqua Stream) for infection prevention and control (IPC) in low-resource health facilities in Ghana and Uganda.

Safe Water Network: a champion and incubator of scalable market-based safe water services in Ghana and India. Active for over a decade in Ghana, it is helping to deliver sustainable and safe peri-urban and small town water services within the main partner district – Asutifi North.

Splash: a nonprofit organisation that designs child-focused water, sanitation, hygiene (WASH), and menstrual health (MH) programmes with governments in global growth cities. In Addis Ababa, Ethiopia and Kolkata, India, they are working to reach 100% of government schools with WASH+MH by 2023, benefiting one million children.

The Stanford Program on Water, Health & Development (WHD): WHD serves as the Conrad N. Hilton Foundation’s Strategy Measurement, Evaluation, and Learning partner, with a focus on the Foundation’s strategy-level measurement and evaluation to inform strategy execution.

WaterAid: a Federation of 34 country offices with a global network of partners, and well-regarded status as a WASH sector thought leader and convener. It has several roles within the Ethiopia partnership, including technical lead on WASH in schools and supporting WASH in communities and health care facilities.

Water4: a US-based champion and incubator of professionalised, private sector approaches to ‘safe water services’ that enable long-term sustainability. Working in Ghana, it is pioneering a bold approach to delivering services to every home, school and clinic within Wassa East District.
WSUP Advisory: Water and Sanitation for the Urban Poor’s UK-based consultancy. They are a global thought leader and advocate who work side by side with service providers to deliver improved water and sanitation services in urban areas. It supports the rural Mid-Western Umbrella utility in Uganda to professionalise its services to secondary towns.

Water.org: a global nonprofit working to bring safe, accessible and cost-effective water and sanitation to the world. In Uganda, it is advancing a microfinance model – WaterCredit.

World Vision: a global humanitarian and development organisation with deep expertise in providing water services to the poorest. It is working as part of the partnership in Ghana, Mali, Ethiopia and Niger, providing basic services to marginalised rural communities.