



The journey so far

Working together for
safe water in Mali

This country brief – compiled by IRC – shares the highlights and lessons learned from collective action in Nossombougou, Ouolodo and Tioribougou communes in Mali. The Safe Water Strategy partnership – made possible with funding from the Conrad N. Hilton Foundation – works to ensure access to safe water services, for everyone, for good.

Please also see the other focus country briefs and the synthesis document: *People, systems and change: harnessing the power of collective action through the Safe Water Strategy* here: <https://www.ircwash.org/resources/working-together-safe-water-journey-so-far>

AUTHORS:

Saliya Niare, Mohamed Kané, and Ingeborg Krukkert

ACKNOWLEDGEMENTS:

We thank Patrick Moriarty and Sára Bori for close review, Marc Jaffrey for editorial guidance, Vera van der Grift for proofreading, Dechan Dalrymple for graphic design, Sanata Théra and Nic-Riabelle Zohoun for collecting and sharing stories and Hélène Figea and

Angela Huston for coordinating the data for our evidence-based storytelling. We could not have shared these lessons and highlights without the support of our partners, Margaret Person (CDC) and Jordan Smoke (World Vision), with providing updates and reviewing, allowing us to speak with a joint voice. See page 11 for a complete overview of our partners in Mali.

PUBLISHED BY IRC

Copy editing by www.writing-services.co.uk

Design and layout by Punt Grafisch Ontwerp

THE STORY OF THE COVER PHOTO

Assistan Koné, Nurse – Public Health Care Centre of Tioribougou commune, Mali. “We’ve learnt a lot from a training by IRC in 2019. WASH at our hospital is satisfactory, we have access to basic services. The biggest difficulty that we’re still facing is informing people on the proper use of facilities on the spot. We are trying our best to provide information but some are escaping our vigilance. So it is very important to continue educating people about WASH services.”

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>.

Our vision



**Moussa Diarra, Mayor
of Tioribougou**

“This plan gives us a clear vision of the objectives and expected results of the municipality. It is essential to identify and rigorously analyse the needs in order to define the objectives and to monitor progress. However, the development of the Communal Strategic Plan was not done only from behind a desk at the Town Hall. We visited villages and communities were invited to participate in the process in order to properly identify their needs.”

Everyone deserves to have safe water. It’s the most fundamental human right, and a basic need that enables fulfilling and productive lives. The vision of the Safe Water Strategy in Mali is to make access to safe water available for everyone, for good.

During the last 20 years, there has been significant progress towards this aim. And Sustainable Development Goal 6 (SDG 6) – access to water and sanitation for all by 2030 – has provided a sense of urgency and fresh impetus.

But we’re still badly off track. Why? Because people have focused on building infrastructure, rather than making water services effective and sustainable. This approach has been inefficient and ineffective. It’s meant that we’ve duplicated efforts and haven’t addressed what matters most to vulnerable communities. What we need now is a change of mindset, and a change of approach. We need to understand the root causes of systemic issues and strengthen the systems that deliver water services: not just infrastructure but also the people, partnerships, incentives, laws and policies that make it work.

The Safe Water Strategy (2017-2021)¹, a programme funded by the Conrad N. Hilton Foundation embraced this challenge by driving systems change in districts in Burkina Faso,

Ethiopia, Ghana, Mali, Niger and Uganda. Safe Water Strategy partners work to bring the ambitions of SDG 6 within reach for households, health care facilities and schools.

The strategy is based on a simple but ambitious hypothesis – that it is possible to have a long-term impact on safe water services for everyone by supporting district-level change through government leadership, local co-ordination of partners and the development of clear and ambitious shared goals that drive systems change, all galvanised through local ‘hubs’.

¹ The Conrad N. Hilton Foundation’s 2017-2021 Safe Water Strategy. <https://www.hiltonfoundation.org/learning/2017-2021-safe-water-strategic-initiative-strategy>

Hubs act as the 'backbone' of each partnership. They help local leaders galvanise and coordinate partners. They facilitate relationships, provide expertise and monitoring, help share learning and ensure continuous communication among partners. These partnerships then explore new solutions through collective action, build institutional capacity to support sustaining services and help expand proven approaches nationally and globally.

The activities of this young collaboration in Mali are concentrated in three communes (districts) – Nossoumbougou, Ouolodo and Tioribougou. Three strategic plans (master plans) were developed by local governments

and the Safe Water Strategy partnership in 2018, and the early focus was to strengthen water, sanitation and hygiene (WASH) systems and services at health care facilities and schools.

The final vision is to reach everyone with safe water and sanitation services in the communes by 2030 starting with achieving 100% coverage in schools and health care facilities. As the partnership matures collective action will inspire political commitment and guide change in the communes and beyond. Insecurity, political instability and weak governance at the national level mean that starting with stable local (commune level) government makes sense.



Koké Lamine Traoré, health centre technical director in Nossoumbougou commune, Mali

The challenge and context in Mali ...

The Government of Mali plans to achieve universal access to drinking water and sanitation by 2030. Its main WASH sector programme – PROSEA II – covers the period 2018–30, in line with the SDG agenda.

In 2017, 78% of people in Mali had access to at least basic water services. In rural areas, over 30% of the population was accessing surface water or using unimproved or limited water services. In 2019, 6% of the schools in the country did not have a water source or got their water from an unimproved water point. This rate is 26% in rural areas and 3% in urban areas. In over 18% of the health centres people had no access to a decent water source. (JMP, 2017–19)

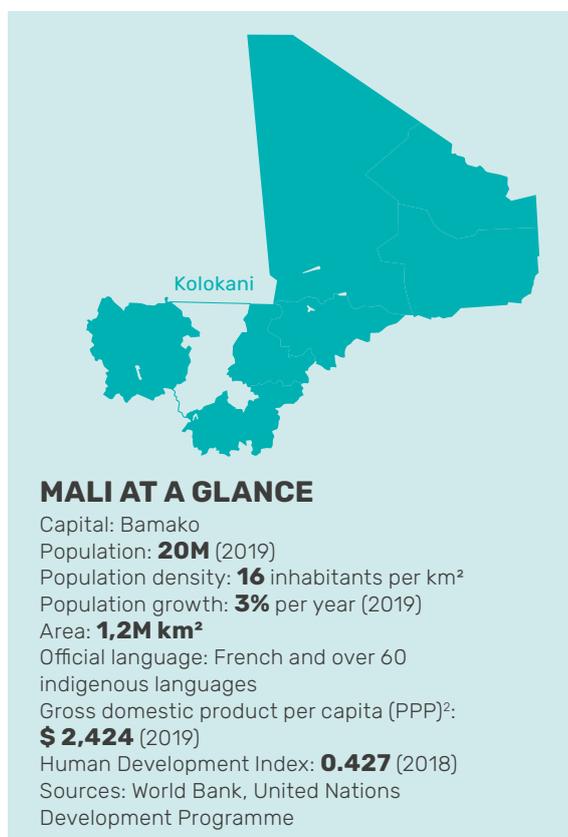
To address these challenges, the WASH sector in Mali is governed by policies and strategic frameworks, which have been turned into action plans. These include the National Water Policy (2006); the National Water Code (2002); the Strategic Plan for the Water Sector (2000–15), and the National Sanitation Policy (2009). They take into account the vulnerable groups living in rural and urban areas, and in hard-to-reach places. They also aim to eliminate open defecation and achieve universal access to basic WASH services by 2030.

Understanding the context of schools and health care facilities in Mali

In 2018, Mali had 2,000 preschools, 15,000 primary schools, 5,000 lower secondary schools and 1,000 upper secondary schools. Half of the primary schools are public, the other half are split between private schools, community schools (often supported by NGOs) and madrasahs (religious schools).

The health system is hierarchical in structure, starting with 1,000 community health centres (CSCOM) which offer basic health services. These services are offered by Community Health Workers through the SEC (Essential Care in the Community).

Above these, are the 62 Referral Health Centres (CSREF), and then seven regional hospitals. At the top of the health pyramid, are the national hospitals: Centre Hospitalier Universitaire Gabriel Touré, CHU Point “G”, Hôpital de Kati and Hôpital du Mali, Odontostomatology and IOTA.



² Purchasing power parity (PPP) is a popular metric used by macroeconomic analysts to compare economic productivity and standards of living between countries. The numbers shared are in international dollars.

... and in Nossombougou, Ouolodo and Tioribougou communes

The three communes are all part of the Kolokani 'Cercle', a sub-division of the Koulikoro region. This is one of nine regions in the country and is located about 100 km north of the capital, Bamako.

Nossombougou has 22 villages, and the population of 28,000 in 2017 is expected to grow to 44,000 by 2030. Ouolodo has 11 villages, and the population of 15,000 in 2017 is expected to grow to 23,000 by 2030. And Tioribougou has 14 villages, and the population of 17,000 people in 2017 is expected to grow to 27,000 by 2030.

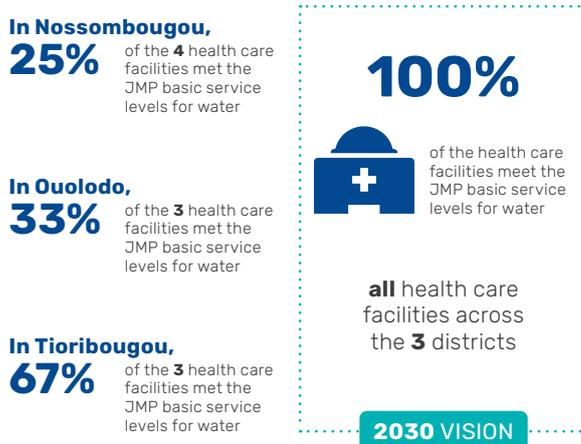
Of the four health care facilities in Nossombougou, only one had access to basic water services in 2019. In Ouolodo, only one of the three health care facilities

had basic water services, while in Tioribougou, two of the three health care facilities had access to basic water services.

WASH access in schools is also mixed. Just over half of the 48 schools across the three communes had basic water services in 2018, and 30 had basic sanitation facilities.

Mali has been suffering from terrorist attacks and political instability. As a result, national government is distracted and finance for local services is not prioritised. This is leading to water systems that are weak, and health care facilities (see Figure 1) and schools have basic or no water. Local institutions need support and money to be able to assess and address the scale of the problems.

Figure 1: Water service levels in health care facilities (2019)³



³ Data based on institutional service level assessments - Diagnostic de la situation de l'approvisionnement en eau potable et de l'assainissement dans les écoles et les centres de santé - conducted by IRC in 2019.

Our collective action in Mali

Who's involved⁴?

National Partners ⁵	Mayors of Nossombougou, Ouolodo, Tioribougou, schools and health centres of the three communes, Le Syndicat Inter Collectivité WASH, Decentralised State Services
International Partners ⁶	Conrad N. Hilton Foundation, Centers for Disease Control and Prevention (CDC), IRC, Swedish Postcode Lottery, World Vision

The Safe Water Strategy partnership works to support the mayors of Nossombougou, Ouolodo, and Tioribougou to improve access to basic water services in health care facilities and schools. These are the entry points to wider systems strengthening.

In 2018, the Mayors, IRC and World Vision, developed a master plan for each commune to achieve the delivery of WASH services to everyone by 2030. The first step is to achieve 100% coverage in all health care facilities. But partners are also working on improving WASH services in schools and reaching every household in the communes by 2030. Access to safely managed water and sanitation services by the majority of the population is a goal in their master plans.

These plans have inspired and drive political buy-in and serve as a roadmap for implementation. They have helped set a vision and the steps needed to achieve this. A more detailed consultation framework, annual work plans and budget plans complement these master plans. The communes and their partners are now working together to deliver them.



The three mayors - Chaka Coulabily, of Nossombougou, Moussa Diarra, of Tioribougou and Kéméssery Diarra, of Ouolodo

At a recent meeting, the three mayors said that they very much appreciated the work happening in their communes by different partners, coordinated by IRC. They especially appreciated the development of the master plans, the annual communal work plans, the appointment of a water and sanitation service (SMEA) officer, and the training that was given to them and the community. They say that a lot has been achieved, but they would like partners to help them improve sanitation in the communes and continue to work with them until their WASH capacities are strengthened to a stage where they can continue by themselves.

⁴ For a detailed list of partners please see pages 10-11

⁵ National partners take on a range of roles including delivering parts of the master plans and holding each other to account.

⁶ International partners are working on implementing the master plans. Most are grantees of the Conrad N. Hilton Foundation, however an increasing number of new partners (e.g. NGOs, funders) are joining the Safe Water Strategy partnership.



Gaoussou Dabo, Water and sanitation service officer in Nossombougou, Sanata Théra, IRC Young Expert Programme officer and Mohamed Kané, IRC WASH officer working on service level data

Partners have been mobilising stakeholders, securing funds, commissioning support and monitoring progress.

Government leadership, supported by the Safe Water Strategy partnership, is at the heart of achieving the goals set in the master plans.

While CDC carried out the initial institutional assessments, IRC is now providing technical and coordination support. This includes the recent addition of a health specialist to the team. World Vision is mainly supporting infrastructure development and management.

As part of their partnership, the Mayors of the three communes, IRC and World Vision:

- hold periodic meetings
- share WASH data
- collaborate on capacity building
- initiate and plan activities together
- intervene together in schools and health centres as well as in communities

Our successes

Political buy-in for the partnership's work is clearly visible. As a result of trainings facilitated by IRC, government leaders are now more confident with national regulatory frameworks and strategies. This has contributed to improvements in local WASH structures. The communes have established a water and sanitation service (SMEA) which gives the communes a focal point for WASH issues, and the regular monitoring of progress.

Another clear sign of government leadership was the establishment of a Kolokani Water and Sanitation Union (Syndicat Inter Collectivité de Kolokani). This partnership of 10 communes, brings together local governments, including our three partner communes.

The partnership helped the governments to recruit a WASH expert for the Union, who is overseen by the mayors of the 10 communes. This expert supports the mayors, the SMEA agents and partners with monitoring and managing WASH services, and has the following specific roles:

- initiate partnerships between the local authorities of the Kolokani circle
- initiate and support the implementation of joint projects
- promote the active participation of local authorities in efforts to consolidate WASH actions/projects

IRC and the Syndicat collaborate by:

- continuous exchange of information
- providing support in training workshops
- reviving two key bodies in each village: AUEP (Associations of Drinking Water Users) and CGE (Water Management Committees).
These are local committees and associations in each village (several per communes) that manage water points
- joint planning of activities

With the help of the partners, these agents have trained 116 local nurses and teachers on approaches like WHO/UNICEF's WASH FIT, risk and hazardous waste management, and other tools that are improving WASH in schools and health care facilities. These activities proved to be particularly valuable in 2020, helping local health centre managers to be better prepared to deal with COVID-19.

IRC has also supported the communes to establish a consultation framework which allows citizens to raise their concerns about WASH issues and to hold decision-makers accountable on progress.

Our progress to 2030

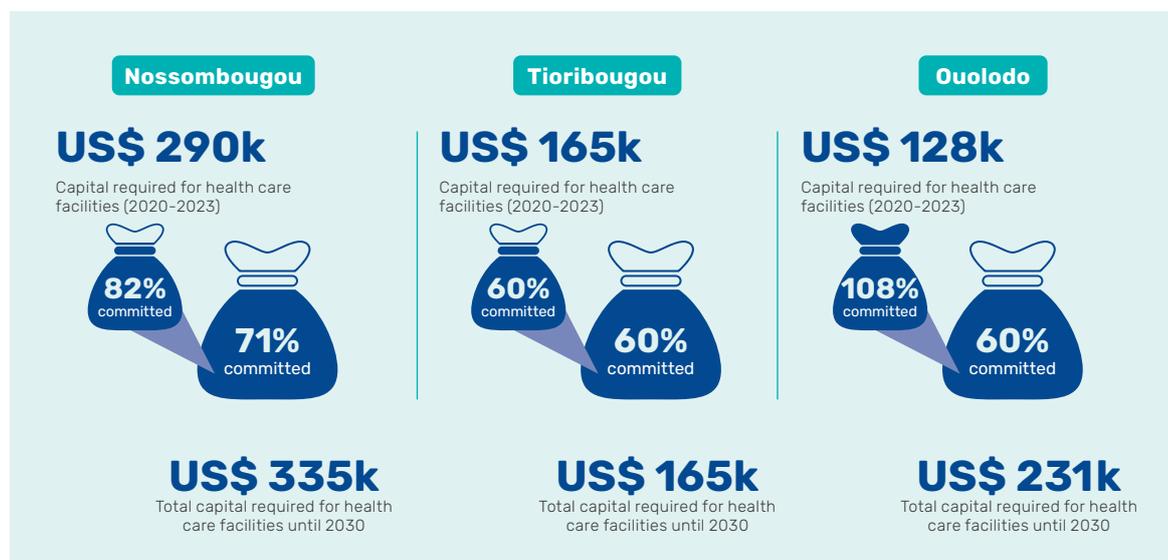
Despite the fragile context, which poses challenges for building robust systems, we are making progress at the local level. In the three communes, 34 schools and six health centres now have basic water services, and 20 of these schools also have basic sanitation and hand washing facilities. Three health care facilities now have basic hand washing facilities with soap and water.

We have secured commitment and funding for the capital needed to work towards

achieving the water vision of the master plans.

In 2020, IRC supported the communes in conducting finance studies to better understand the costs and gaps related to their 2030 vision. As figure 2 shows progress has been made in raising funds for capital expenditure, but identifying reliable sources of finance for direct support and systems strengthening remains a challenge.

Figure 2: Total capital required and committed for the 2030 vision⁷



⁷ Source for capital expenditure data: Funding gap and investment needs for drinking water supply and sanitation in schools and health care facilities by 2030 (2020).

What are we learning?

The master plans have motivated the communes to draw support from partners in order to achieve their WASH vision. They have appointed WASH experts to support the coordination and regular monitoring at commune level. But, despite increased construction and rehabilitation of water points, progress is slow. Continued capacity building and mobilising additional funding is key to increasing efficiency.

The following initiatives have the potential for scale to other communes and regions of Mali:

- Developing master plans
- Setting up a water and sanitation service (including hygiene) embedded in local government (municipalities)
- Institutionalising consultation frameworks between national and commune level institutions
- Organising and institutionalising annual WASH reviews
- Strengthening coordination mechanisms that involve local government and other actors in the communes
- Developing a clear advocacy strategy for fundraising

What's next?

Partners will continue to strengthen capacity, attract additional resources and improve the coordination mechanisms needed to focus everyone's efforts on the same vision and move quickly towards achieving water and sanitation for everyone by 2030.

They will also continue to synchronise their efforts to make sure that good governance practices exist at WASH facilities, and will mobilise funds for improving WASH in schools.

Poverty in rural communities is more apparent than in urban areas. Yet, the water service in these rural communities is the most expensive. This leads to some households choosing not to use borehole water or prevents certain localities from dealing with breakdowns. All partners are aware that they must continue to look for ways to increase the level of income-generating activities and bring these issues into their national level advocacy if they are to achieve the 2030 vision of Nossombougou, Ouolodo and Tioribougou communes.

Who we are and what we do?

Under the political and technical leadership of Nossombougou, Ouolodo and Tioribougou local governments, national and international actors are helping the communes to achieve their vision.

They include government agencies at national, regional and district level, and national agencies responsible for water, education, health, finance/ tax and environment. All of them play a key role in providing local leadership, and inspiring and driving change.

The following entities work in and with the three communes:

- the Mayors of Nossombougou, Ouolodo, Tioribougou
- schools and health centres in the three communes
- le Syndicat Inter Collectivité WASH
- decentralised state services: Local Hydraulic Service (SLH); Sanitation, Pollution and Nuisance Control Service (SACPN); the Reference Health Centre (CSRéf); and the Pedagogical Animation Centre (CAP). They all provide technical support to ensure compliance with regulations.

National and rural public utilities provide WASH services and improve quality.

Local private-sector providers and civil society actors or local leaders also play a key role in sharing their learning to improve systems and services to accelerate change. They help to identify those who lack safe water and sanitation and hold the people and organisations with the power to effect change to account.

These local stakeholders are also supported by a growing partnership of external actors, including the following:

The US Centers for Disease Control and Prevention (CDC)

is the national public health agency of the US and a global public health leader. In Mali, CDC focuses on conducting assessments in health care facilities and schools.

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.

IRC is a Dutch-based champion of 'systems thinking' within WASH. In Mali, its early focus has been on 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 IRC's role as a hub is developing.

The Stanford Program on Water, Health & Development (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.

World Vision is 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 Mali to provide basic services to marginalised rural communities, health centres and schools. It also carries out capacity building activities.



CONRAD N. HILTON
FOUNDATION

IRC

World Vision 