

2015 ANNUAL REPORT



WSSCC
WATER SUPPLY & SANITATION
COLLABORATIVE COUNCIL

About WSSCC

The Water Supply and Sanitation Collaborative Council (WSSCC) is at the heart of the global movement to improve sanitation and hygiene, so that all people can enjoy healthy and productive lives. Established in 1990, WSSCC is the only United Nations body devoted solely to the sanitation needs of the most vulnerable and marginalized people. In collaboration with our members in 150 countries, WSSCC advocates for the billions of people worldwide who lack access to good sanitation, shares solutions that empower communities, and operates the GSF, which since 2008 has committed over \$112 million to transform lives in developing countries.

Acknowledgments

WSSCC gratefully acknowledges the donors that have made the work of WSSCC possible for the last 25 years: the Governments of Australia, Finland, the Netherlands, Norway, Sweden, Switzerland and the United Kingdom.

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CONTENTS

1	Sanitation and Hygiene in the 2030 Agenda: Message from the Chair	2
2	Reflections on 2015: Foreword from the Executive Director	3
3	Global Sanitation Fund: Supporting advances in sanitation and hygiene for communities across 13 countries	4
4	Leave No One Behind: Sanitation and hygiene for women, adolescent girls, elderly, transgender, persons with disabilities and sanitation workers	9
5	The Sanitation and Hygiene Movement: Advocating for change	12
6	The Evidence Base: For WSSCC and beyond	16
7	Financial Overview	18
8	Steering Committee, National Coordinators and Donors	20

1

SANITATION AND HYGIENE IN THE 2030 AGENDA

MESSAGE FROM THE CHAIR

2015 was a very important year for everybody who is deeply involved in protecting and positively transforming our world through impactful development. Every nation unanimously adopted Agenda 2030, which includes 17 goals and 169 targets, each essential and ambitious in their own right, and together offering a unique opportunity for impactful change. Agenda 2030 represents a paradigm shift towards sustainable development with the principles of equality and non-discrimination at its core. This means that the Sustainable Development Goals (SDGs) strive to leave no one behind, as opposed to the previous Millennium Goals which often resulted in targeting the easiest to reach.



WSSCC and its sector colleagues ensured that sanitation and hygiene were included in the goals of the new development agenda. The adoption of Goal 6 – *Ensure availability and sustainable management of water and sanitation for all* – and specifically SDG target 6.2 – *by 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations* – was received with great excitement and a recommitment of all partners involved. The Council is particularly pleased with the principle of universality and a clear reference to vulnerable groups.

For WSSCC, SDG target 6.2 will be leading the way and informing every aspect of our work. In fact, the focus of the Council has always been to give voice to the

voiceless, and to work to improve the lives of the poorest by improving access to safe sanitation and good hygiene. The new goals give legitimacy to WSSCC's efforts to continue to reach out to excluded and vulnerable groups, women and girls, elderly, people with a disability and families living in remote areas. However, we believe that our work on sanitation and hygiene will also further the accomplishments of other goals, such as ending poverty (Goal 1), healthy lives (Goal 3), inclusive and equitable education (Goal 4), gender equality (Goal 5) and human settlements (Goal 11). In addition, WSSCC strongly believes in partnerships (Goal 17) to achieve this global development agenda.

Going forward, WSSCC will therefore strengthen our cross-sectoral approaches and partnerships including with ministries of health, education, urban housing and planning as well as the civil society and private sector.

2016 will be the first year of the roadmap towards 2030. WSSCC will fully embrace this challenge by developing a new strategic plan to ensure that it is ready to contribute towards the goal of achieving access to adequate and equitable sanitation and hygiene for all.

Andrew Cotton, PhD

Acting Steering Committee Chair, WSSCC

Director of WEDC from 2008-2013

“2015 was a very important year for everybody who is deeply involved in protecting and positively transforming our world.”

2

REFLECTIONS ON 2015

FOREWORD FROM THE EXECUTIVE DIRECTOR

Throughout its 25 years of existence, WSSCC has envisaged a world where everyone has access to sustained water supply, sanitation and hygiene and, since 2008, has deliberately chosen to focus on ensuring access to sanitation and hygiene. This work is primarily driven through the Global Sanitation Fund (GSF), supporting large scale sanitation and hygiene improvement programmes in 13 countries. In 2015 WSSCC also deepened its work on human rights in WASH and equality and non-discrimination through applied research, platforms for voice and agency, policy advocacy with national governments and facilitation of regional meetings and ministerial commitments.



The Global Sanitation Fund is working at a scale never seen before. Since its launch in 2008, the GSF has enabled 11 million people to end open defecation through people-centred approaches that engage households in close to 76,000 communities. Health, education and local governance units are increasingly leveraged to reach scale within each community. GSF methodologies can also be replicated and scaled up to contribute to national sanitation strategies and plans.

In 2015, WSSCC's work on equality and non-discrimination shifted to a higher gear, with interventions at the national, regional and global levels. Policy advocacy at the national level on gender, sanitation and hygiene, in particular on MHM, as in Senegal, Cameroon, Niger and India, has been reinforced by the Council's work with heads of delegation of governments participating in regional sanitation conferences such as AfricaSan and SACOSAN, and in global meetings such as the Commission on Status of Women, Financing for Development Conference, and the World Health Assembly. In light of the new development agenda with the principle of universality at its core, WSSCC considers its work in this area very strategic. For the next few years, mainstreaming equality and non-discrimination in all aspects of WSSCC's work will be a major focus,

aiming to contribute more efficiently towards achieving sanitation and hygiene for all.

In recent years, innovative work on equity and inclusion and the impact of the GSF-supported sanitation and hygiene programmes has warranted increased documentation, research and policy analysis. This has required increasingly complex systems for learning and managing knowledge. Looking to the future, WSSCC will pursue a combination of research, knowledge platforms, and learning systems.

In 2015, WSSCC continued to increase its engagement with governments and to strengthen its external relations. The engagement with elected officials and senior civil servants in the WSSCC partner countries often involved negotiations with Prime Ministers and Ministers about co-financing of GSF-supported programmes, such as for example in Madagascar. WSSCC has also been working more directly with Permanent Missions to the United Nations in New York and Geneva, which proved helpful in lobbying for specific changes in regional and global processes. The culmination of these efforts occurred at the celebrations at the UN Palace in Geneva marking the 25th Anniversary of WSSCC (*see inside back cover page*).

One should not underestimate the incredible amount of work needed to implement SDG target 6.2. There are few international institutions and organisations that solely focus on this important target. For WSSCC, helping governments achieve sustainable sanitation and hygiene for all, including women and girls and vulnerable groups, continues to be the core of its mission.

Christopher Williams, PhD

Executive Director, WSSCC

“For WSSCC, helping governments achieve sustainable sanitation and hygiene for all, including women and girls and vulnerable groups, continues to be the core of its mission.”



3

GLOBAL SANITATION FUND

Supporting advances in sanitation and hygiene for communities across 13 countries

Adequate water and sanitation is both a human right and a daily need for everyone. Despite this, improving sanitation and hygiene remains a challenge for 2.4 billion people, about a third of the world's population. One of the ways WSSCC works to meet this challenge is through its Global Sanitation Fund (GSF).

The GSF is a global fund launched by WSSCC in 2008, and solely dedicated to sanitation and hygiene. It finances sanitation programmes that are nationally developed, community-based and government-supported. Across 13 countries, the GSF has enabled 11 million people to end open defecation through people-centred approaches that engage households in thousands of villages. In turn, people make informed decisions about their sanitation and hygiene behaviours that can positively impact their health, education, income, productivity and dignity.

The GSF approach to community-led total sanitation is therefore one contribution which can be replicated and scaled up to achieve nationwide coverage, as envisioned in national sanitation strategies and the Sustainable Development Goals (SDGs), in countries as diverse as Senegal, Malawi and Nepal, to name a few.

The GSF recognizes the importance of data reliability and the challenges associated with the monitoring of sanitation and hygiene behaviour change programmes. In 2015, it therefore looked for ways to improve its monitoring and evaluation systems. Activities in this regard included developing results verification methodologies based on statistical methodologies; ensuring alignment with as well as providing support to national monitoring systems. To carry out the complex task of monitoring behaviour change in sanitation and hygiene, the GSF worked to find the right balance between human and financial resources, while ensuring quality and value. This included the alignment of GSF monitoring systems with national systems, as well as capturing disaggregated data (age, gender, etc.) and the nuances of behavioural and 'slippage' patterns. Third-party outcome surveys and mid-term evaluations commissioned for GSF-supported country programmes contributed to a greater understanding of what works and what needs to be improved.

The following pages give a glimpse of how GSF-supported programmes worked with in-country partners to accelerate the development of national sanitation and open defecation free (ODF) strategies. In addition, significant progress was made in better addressing challenges related to maintaining ODF status and behaviour change; furthermore, in-country innovations were developed and scaled up, and many programmes enhanced their implementation through national and international learning exchanges. Increased focus has been put on integrating extra-household settings as a means to achieve total sanitation, including schools and health centers.

Looking ahead to 2016, the GSF is well positioned to play a central role in supporting the global investment needs for sanitation and hygiene. It will build on 2015's efforts to boost the capacity of people working in sanitation and hygiene, increase innovation and results of country programmes, as well as further strengthen monitoring, evaluation and learning systems.

WANT TO LEARN MORE ABOUT THE GSF?

The 2015 GSF Progress Report provides a comprehensive overview and analysis of the Fund's activities and performance. The report is available at www.wsscc.org

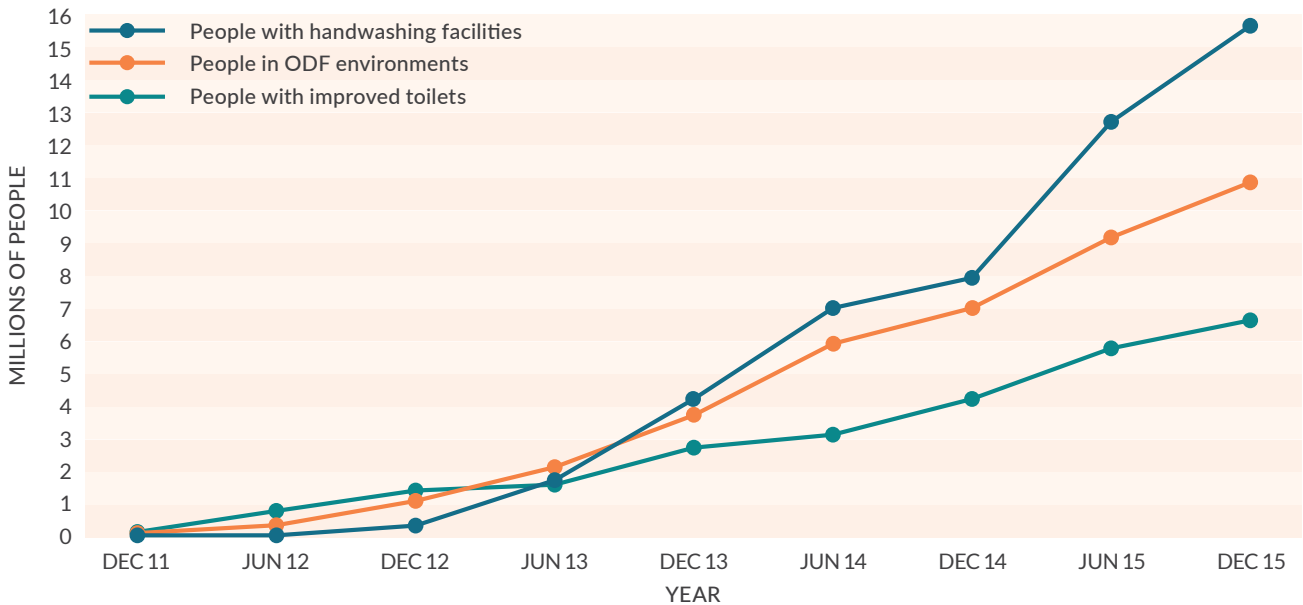


RESULTS OVERVIEW

KEY RESULTS



RESULTS PROGRESSION



GSF-SUPPORTED COUNTRIES

- | | | |
|----------|------------|----------|
| BENIN | MADAGASCAR | SENEGAL |
| CAMBODIA | MALAWI | TANZANIA |
| ETHIOPIA | NEPAL | TOGO |
| INDIA | NIGERIA | UGANDA |
| KENYA | | |

IN-COUNTRY PROGRAMMES: CATALYSTS FOR NATIONWIDE COVERAGE

A key theme in 2015 was the need for a more explicit ‘theory of change’, or a comprehensive description of the sequence of activities that is expected to lead to universal access. Good programme design, a demonstration of results at scale, and a transition to national coverage under government-led programmes that leverage the GSF experience, are currently recognized as the three phases of GSF-supported programmes. During the design phase of the Benin programme (*see photo*), for example, potential GSF funding triggered the sector to establish a government-led ‘Steering Committee for Hygiene and Basic Sanitation’, which also includes the GSF Programme Coordinating Mechanism.



LOCAL AND NATIONAL GOVERNMENT OFFICIALS, THE WSSCC NATIONAL COORDINATOR AND THE GSF EXECUTING AGENCY PARTICIPATED IN AN INFORMATIONAL MEETING TO ENHANCE COLLABORATION IN SIX COMMUNES IN THE COLLINES DEPARTMENT IN BENIN. ©PAPHYR

REAL-TIME LEARNING AND INNOVATION IN CAMBODIA



CRSHIP IMPLEMENTATION PARTNERS DISCUSS THE DEFINITION OF SHORT NARRATIVE AND FIELD MESSAGE DURING AN ORIENTATION WORKSHOP. ©WATERAID/KIM OAN UNG

The GSF focuses on continuous learning at the national, regional and global levels to boost implementation and innovation. For example, the Cambodia programme includes a grant to implement a real-time learning strategy aiming at developing collective adaptive capacity for enhanced impact (*see photo*). Innovations from Cambodia also include the ‘Participatory Social Assessment and Mapping’ (PSAM) approach to identify excluded groups, and the ‘Three Behaviors in One Hour’ (3B1H) approach. 3B1H is a strategy focusing on all three key WASH behaviours that lead to basic hygiene and sanitation in rural areas: using latrines consistently, handwashing with soap at critical times, and drinking safe water.

GENERATING PARTICIPATION, INCLUSIVENESS AND SUSTAINABILITY IN SENEGAL

Women’s Health Education and Prevention Strategies Alliance (WHEPSA) is a local NGO working in the Matam and Mbacké departments of Senegal. Since 2013, all 104 villages covered by the sub-grantee have maintained ODF status, despite differences in size, ranging from the hundreds to the thousands. This achievement has been thanks to WHEPSA’s steadfast post-ODF monitoring and engaging local stakeholders at all levels. As part of this approach, the NGO has promoted the development of community-managed solidarity funds that have been used to build improved latrines, including for the poorest and most vulnerable. More than 1,000 women have also been trained and empowered to manufacture soap for income generating activities (*see photo*). Revenues from the soap also contribute to solidarity funds.



SEYNABOU, CHAIR OF THE LOCAL COMMITTEE IN THE VILLAGE OF WASSACODE IN SENEGAL, SUPPORTS HER VILLAGE AND OTHER COMMUNITIES THROUGH THE LOCAL PRODUCTION OF SOAP. SHE IS ALSO RAISING AWARENESS ABOUT THE IMPORTANCE OF IMPROVED SANITATION AND HYGIENE. ©WSSCC/ALMA FELIC

IN UGANDA, LOCAL GOVERNMENT IS CHAMPIONING COLLECTIVE BEHAVIOUR CHANGE



DISTRICT HEALTH OFFICE STAFF AND COMMUNITY MEMBERS IN KOBOKO DISTRICT IN UGANDA. ©WSSCC/PATRICK ENGLAND

In Uganda, a local government GSF sub-grantee (*see photo*) has utilized a number of approaches to achieve behaviour change. These include CLTS; utilizing the ‘Follow-up MANDONA’ approach developed in Madagascar to help triggered communities rapidly achieve and sustain ODF; engaging primary school children to promote sanitation; delivering sanitation campaigns; and supporting supply-side initiatives such as sanitation marketing.



4

LEAVE NO ONE BEHIND

Sanitation and hygiene for women, adolescent girls, elderly, transgender, persons with disabilities and sanitation workers

WSSCC's rights-based approach has centred on bringing the direct voices of historically marginalized groups such as women, adolescent girls, persons with disabilities, elderly people, transgender people and sanitation workers, face to face with policy makers and practitioners.

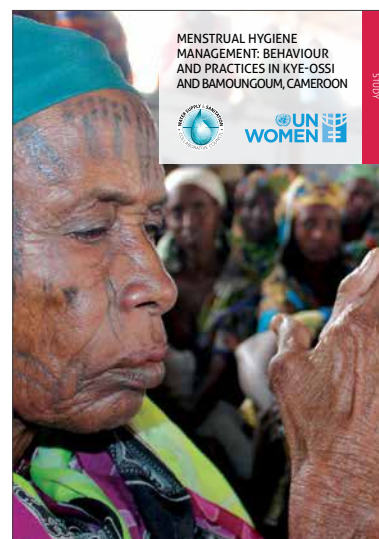
In collaboration with the Freshwater Action Network South Asia (FANSA), WSSCC designed and supported consultations in eight countries – the Maldives, Sri Lanka, Bhutan, Afghanistan, Nepal, Pakistan, Bangladesh and India – involving all of the above mentioned excluded groups to capture their voices, concerns and hopes regarding water, sanitation and hygiene. The results of those consultations are captured in the report: *Leave No One Behind: Voices of Women, Adolescent Girls, Elderly, Persons with Disabilities and Sanitation Workforce*. The report was launched at the South Asian Regional Sanitation conference, SacoSan VI in Dhaka in January 2016 (see opposite page).

As a recognized thought leader on gender, sanitation and hygiene, in particular through its work on Menstrual Hygiene Management, WSSCC has leveraged this area of work for broader equality and policy advocacy linked to gender, age and disability. This is achieved through collaboration with national governments and partners such as the WSSCC-UN Women Partnership in West Africa. Through those partnerships with strategically selected non-WASH partner organizations, WSSCC aims to broaden the engagement and delivery on the right to sanitation.

In **Senegal**, the Senegalese Government has integrated MHM as a criterion into all government coordinated proposals for external financing of WASH infrastructure. In addition, WSSCC has provided systematic

technical inputs into a new national level sanitation and hygiene policy, advocating for a stronger equality focus. This involves building a shared agenda on the need to break the silence on menstruation, especially to reach adolescent girls in and out of school. The advocacy was supported by two research studies on MHM undertaken in two regions of Senegal (see below). In **Niger**, the WSSCC-UN Women Joint Programme's team held the first national Training of Trainers on MHM with the endorsement of the Minister of Water and Sanitation. In **Cameroon**, the first Strategic Planning meeting resulted in the Sanitation Department within the Water and Energy Ministry including MHM into its rural sanitation programme. WSSCC also successfully launched a study (see below) on behaviours and practices in Kye Ossi and Bamoungoum, two regions of Cameroon, bringing together high-level representation from the ministries, as well as over 70 participants.

WSSCC has been working with the Government of **India** to merge two separate conversations on an Open Defecation Free India and on MHM and disability. WSSCC facilitated the first national definition of Open Defecation Free to include hygiene behaviour, faecal sludge management and phased movement up the ladder, in addition to the basic first step of ridding the environment of human excreta. Central to all WSSCC's work in India is to integrate the needs of excluded groups into national investments and achievements of the Indian Swachh Bharat Mission.



VOICES OF THE VOICELESS: 55 CONSULTATIONS, OVER 2,700 PEOPLE, 8 SOUTH ASIAN COUNTRIES

The consultations engaged adolescent girls, women and men, youth and the elderly, transgender people, sanitation workers, waste pickers, and disabled people of different age groups and from rural, urban slum and tribal settings. Those consulted were often, for the first time, being asked what their constraints are, what they need, how they cope and how they would design water, sanitation and hygiene services differently to enable universal access and use. The report is available at www.wsscc.org



A CALL TO ACTION ON MENSTRUAL HYGIENE, HOSTED BY THE MINISTRY OF FOREIGN AFFAIRS OF THE NETHERLANDS (DGIS), WSSCC, SCA AND OTHERS DURING A STOPOVER OF THE VOLVO OCEAN RACE IN THE HAGUE, THE NETHERLANDS. @WSSCC/EMILY DESCHAIINE

PARTNERING WITH THE PRIVATE SECTOR

In 2014, WSSCC entered into a Public-Private Partnership with SCA, a Swedish hygiene products company. The first phase of the partnership on breaking the silence on menstrual hygiene management during the Volvo Ocean Race was successful in bringing together WSSCC's technical expertise on sanitation and hygiene issues in developing countries with SCA's global brands and commitment to sustainability, education and innovation. The partnership centred on high-level seminars, focus group discussions, media events and menstrual hygiene trainings with local girls and women, and advocacy via the media and local champions. The partnerships activities took place in South Africa, China, the USA, Portugal, the Netherlands and Sweden. The first phase of the partnership concluded in June 2015, and upon evaluation of the objectives achieved, both partners have committed to a second phase of the partnership focused on evidence-driven initiatives linked to global hygiene behaviours, advocacy and R&D.

TRAINING ON MENSTRUAL HYGIENE MANAGEMENT NEEDS FOR HUMANITARIAN ACTORS AND REFUGEES IN CAMEROON

In October 2015, WSSCC provided technical support to UN Women and to the UNHCR for the training of humanitarian actors and refugees on MHM in Bertoua, Cameroon. The workshop participants learned about the need to understand menstrual hygiene management, in relation to education, sanitation and the environment, and studied MHM techniques, the menstrual cycle and how to use menstrual hygiene training kits.



7,500 PEOPLE LIVE IN TIMANGOLO REFUGEE CAMP IN CAMEROON. EACH PERSON HAS ACCESS TO 18.7L OF WATER PER DAY. THE CAMP COUNTS 730 LATRINES AND SHOWERS. HOWEVER, FEW OF THEM ARE SAFE AND PRIVATE AS THE FACILITIES HAVE EITHER NO DOORS, OR THE DOORS CANNOT BE PROPERLY CLOSED. ©WSSCC/JAVIER ACEBAL



LOCAL LEADERS ARE COMMITTING TO AN OPEN DEFECTION FREE TOGO DURING A WORLD TOILET DAY CELEBRATION IN 2015 ©WSSCC/ACHILLE LOKOSSOU-DAH-LANDE

5

THE SANITATION AND HYGIENE MOVEMENT

Advocating for change

WSSCC is part of the sanitation and hygiene movement through both global and national engagement. At the global scene, WSSCC played an instrumental role in supporting Member States to agree on water and sanitation as a dedicated goal of the post-2015 development agenda adopted by the UN General Assembly in September 2015.



Intense lobbying efforts were undertaken at various levels by WSSCC to ensure that sanitation and hygiene were included in the SDGs. This was done through engagement in public debates, one-on-one meetings, facilitating global and national connections, discussing issues like financing for development, means of implementation and targets and indicators.

In addition, WSSCC was a core member of the 'Equity and Non-discrimination Group' which proposed equity targets and indicators for global monitoring of the SDGs. WSSCC provided technical inputs by drawing on its evidence from the ground on discrimination against women for access to water and sanitation, and on areas of menstrual hygiene, helping to ensure that equality would be integrated into the implementation process.

WSSCC, together with the host government Senegal, facilitated and negotiated the Ngor Declaration at

AfricaSan IV, ensuring Member State voice and agreement with the declaration. The Council has also partnered with the African Ministers Council on Water (AMCOW) to support the implementation of the Ngor declaration by African Member States.

WSSCC leveraged innovative and high-level advocacy platforms for social change, such as Global Citizen, to pressure national governments to prioritize sanitation and hygiene. This strategy has contributed to the Netherlands and Sweden making significant new commitments to water and sanitation in April in Washington, DC at the Earth Day Festival, and in September 2015 in New York at the Global Citizen Festival, respectively. WSSCC's work with Global Citizen is part of a broad and innovative effort to increase the size of the financial pie for the WASH Sector.

FIRST LADIES AND LEADING INTERNATIONAL WOMEN SIGN A DECLARATION ON SANITATION AND HYGIENE

A Declaration on Sanitation and Hygiene was launched on Earth Day 2015. The declaration was signed by 44 influential women from global leadership, media, and powerful organizations around the world, including the First Lady of Malawi, Gertrude Maseko and First Lady of Madagascar, Voahangy Rajaonarimampianina, both facilitated by WSSCC. The declaration calls on politicians and decision-makers in the health sector to recognize the importance of Water, Sanitation & Hygiene (WASH), and to commit to improving access for all those that are living without access to clean water and adequate sanitation.



(LEFT TO RIGHT) GEETA RAO GUPTA, DEPUTY EXECUTIVE DIRECTOR (PROGRAMMES), UNICEF; ALICE ALBRIGHT, CHIEF EXECUTIVE OFFICER, GLOBAL PARTNERSHIP FOR EDUCATION; FIRST LADY OF MALAWI, GERTRUDE MASEKO; FIRST LADY OF MADAGASCAR, VOAHANGY RAJAONARIMAMPIANINA; CHAIRMAN, CLTS FOUNDATION, DR KAMAL KAR; JUNAID AHMAD, SENIOR DIRECTOR, WORLD BANK GROUP ON WATER GLOBAL PRACTICE. ©WSSCC

At the country level, WSSCC is supporting national action plans, referred to as Strategic Engagement Plans (SEPs), led by National Coordinators in 16 countries throughout South and Southeast Asia and West, East and Southern Africa.

Advocacy is central to influencing people, policies, structures, systems and practices to bring about lasting change for unreached communities. The adoption of the Sustainable Development Goals (SDGs) in September 2015 has demanded of the National Coordinators a greater precision to reach the ambitious targets. To strengthen the capacities of WSSCC's in-country partners, a global meeting and two regional workshops were set-up to facilitate peer-to-peer learning and sharing on sector priorities for achieving change.



THE EAST AFRICA COUNTRY ENGAGEMENT WORKSHOP TOOK PLACE IN KAMPALA, UGANDA FROM 9-13 NOVEMBER 2015 WITH PARTICIPANTS FROM MALAWI, ZIMBABWE, ETHIOPIA, NIGERIA, KENYA, TANZANIA AND UGANDA. ©WSSCC/ELIZABETH WAMERA



THE WEST AFRICA COUNTRY ENGAGEMENT AND ADVOCACY WORKSHOP TOOK PLACE FROM 19-23 OCTOBER 2015 IN LOMÉ, TOGO WITH PARTICIPANTS FROM BENIN, NIGER, MADAGASCAR AND TOGO. ©WSSCC

In 2015, WSSCC's 16 National Coordinators engaged in a number of diverse activities, which demonstrated local WASH activism, and the dynamism of WSSCC's collaborative approach. Below and on the next page is a snapshot of activities in Cambodia, Malawi, and Niger.

More information on the strategic engagement plans of all 16 countries can be found in the National Coordinators report. The report is available at www.wsscc.org



WORKING ON WASH AND NUTRITION IN CAMBODIA



NATIONAL NUTRITION DAY, LAUNCHED FOR THE FIRST TIME IN 2014, IS CELEBRATED ON 6 NOVEMBER, AND INVOLVES ALL RELEVANT STAKEHOLDERS, INCLUDING MEDIA. FROM LEFT TO RIGHT: MR. HOU KROEUN, HKI, REPRESENTATIVE OF CIVIL SOCIETY; DR. SEK SOPHEANARITH, USAID, REPRESENTATIVE OF DEVELOPMENT PARTNERS; DR. SOPHORNARY, DEPUTY DIRECTOR OF NATIONAL MATERNAL CHILD HEALTH; MR. CHREAY POM, DIRECTOR OF DEPARTMENT OF RURAL HEALTH CARE; DR. CHEA SAMNANG, DIRECTOR OF CABINET AND CHAIRMAN OF COUNCIL FOR AGRICULTURAL AND RURAL DEVELOPMENT, WSSCC NATIONAL COORDINATOR; MODERATOR, STATE TV. ©WSSCC

In 2015, WSSCC's National Coordinator Dr. Samnang continued to work on the link between WASH and Nutrition. In order to improve the policy and programmatic linkages between WASH, food security and nutrition, discussions with the Ministry of Rural Development, other relevant line ministries and development partners defined the mandate of the WASH and Nutrition Working Group.



THE PRESIDENT OF THE WASH PARLIAMENTARIAN NETWORK IN NIGER DURING AN INSTITUTIONAL TRIGGERING WHERE DECISION MAKERS ARE COMMITTING TO ENDING OPEN DEFECATION IN THEIR COUNTRY. THIS PROCESS WAS LED BY DR. RIJA L. FANOMEZA, THE GSF PROGRAMME MANAGER IN MADAGASCAR, WHERE THIS INNOVATIVE ADVOCACY APPROACH WAS CREATED. ©WSSCC/REJEA

WORKING WITH PARLIAMENTARIANS IN NIGER

The key achievement for 2015 was the creation of a WASH parliamentarians network to advance rights-based advocacy towards policy-makers at central and decentralized level. The network was established through a resolution by the Niger National Assembly in November 2015. The aim is to disseminate legislation on hygiene and sanitation issues; advocate for increased and more efficient budget allocation; raise awareness of the links between poor hygiene and sanitation and diseases, and create exchanges with similar networks.

WSSCC SUPPORTED CAPACITY BUILDING FOR CIVIL SOCIETY IN MALAWI

CSO members developed a WASH NGO reporting framework and a CSO annual report, which enabled CSOs to participate technically and financially at the WASH Joint Sector Review for the first time. Other work included the signing of a memorandum of understanding (MOU) between WASH CSOs working at the district level and the District Council, leading to increased coordination and efficiency.



PARTICIPANTS OF THE DISTRICT WORKSHOP TO STRENGTHEN THE SOUTHERN CHAPTER OF THE WES NETWORK @ WSSCC/NGABAGHILA CHATATA

INTERNATIONAL MEDIA VISIT MADAGASCAR

In September 2015, WSSCC hosted the first visit by international journalists to a GSF country. Five international journalists from major news outlets in Sweden, the USA, South Africa, Benin, and Spain visited Madagascar for a week and spent time in GSF field locations. The journalists were excited to visit remote villages that are hard to access, and to spend quality time with Malagasy communities, learning how they had been empowered to take control of their sanitation and hygiene behaviours. Throughout the visit, the methodology of CLTS was extremely well communicated – by the end of the visit, the journalists understood how WSSCC facilitates ODF environments and how the approach differs from traditional subsidy-driven interventions. The visit resulted in eight articles in print and online, which were exceedingly positive about the benefits of intervention and the approach of the GSF.



JOURNALISTS INTERVIEWING LOCAL VILLAGERS IN MADAGASCAR. ©WSSCC/ALISON BRADLEY

A SIDE EVENT HOSTED BY WSSCC AND 3ie AT THE EVALUATION CONCLAVE 2015 IN KATHMANDU, NEPAL, DISCUSSED HOW EVALUATION PARTNERSHIPS CAN BE EFFECTIVE FOR ACHIEVING DEVELOPMENT IMPACT AND FOR BRIDGING THE GAP BETWEEN EVALUATORS AND POLICYMAKER. ©WSSCC



6

THE EVIDENCE BASE

For WSSCC and beyond

2015 was a milestone year for the Evaluation Community, as it was 'The International Year of Evaluation' with the aim of advocating and promoting evaluation, and evidence-based policy making and programming at the international, national and local levels. WSSCC made a humble contribution towards this movement in order to strengthen the demand for, and use of, evaluation to inform public policies and programmes.

LAUNCH OF THE EVIDENCE PROGRAMME FOR SANITATION AND HYGIENE (EPSH) IN PARTNERSHIP WITH THE INTERNATIONAL INITIATIVE FOR IMPACT EVALUATION (3ie)

In 2015, WSSCC successfully launched the EPSH programme, with a key objective of making a meaningful contribution towards the evaluation and evidence building mission in the WASH sector and beyond.

The programme has four facets of work, including a i) Midterm Review of WSSCC's Strategic Plan from 2012-16; ii) two Impact Evaluations (IE); iii) two systematic Reviews (SR); and iv) Advocacy Evaluation Methodology.

- **IE 1:** Does the Global Sanitation Fund (GSF) programme reduce psychosocial stress, improve safety and improve the quality of life among women and girls? Study site India
- **IE 2:** Investigating the impact of enhanced Community-led Total Sanitation and Hygiene (CLTSH) on mental well-being and sustained behaviour change. Study site Ethiopia
- **SR 1:** How effective are interventions that promote sanitation and hygiene behaviour change in communities?
- **SR 2:** To what extent has the WASH sector considered the lifecycle approach in the design and implementation processes, including the maintenance and use of programme services during the MDG era 2000-2015?



More information can be found in the report: *The Evidence Programme on Sanitation and Hygiene*. The report is available at www.wsscc.org

PARTNERSHIPS FOR EVALUATION: DISCUSSION AT THE SECOND EVALPARTNERS GLOBAL FORUM AND THE EVALUATION CONCLAVE 2015, KATHMANDU, NEPAL

WSSCC, in partnership with 3ie, organized a panel discussion to deliberate on how evaluation partnerships can be effective for achieving development impact, and for bridging the gap between evaluators and the policy-makers in the SDG period.

The discussion drew attention to the fact that evaluators are required to make a far more robust effort to engage the media, politicians and policy makers in order to produce accountable results for use in real-world policy and practice.

INDEPENDENT MID-TERM EVALUATION OF GSF COUNTRY PROGRAMMES

An independent Mid-Term Evaluation of seven GSF Country Programmes – Madagascar, Senegal, Uganda, Nepal, Cambodia, Malawi, and India – was completed by the consulting firm IOD Parc. These were consolidated into a Synthesis Report and Management Response. The report is available at www.wsscc.org



JOINT RESEARCH WITH SHARE CONSORTIUM ON WOMEN, SANITATION AND HYGIENE IN SOUTH ASIA

WSSCC and the SHARE Research Consortium published six studies in 2015 focusing on the effects of inadequate sanitation and hygiene on girls and women. The studies highlight the links between unsafe sanitation and hygiene and poor health, women and girls' safety, confidence and mobility as well as the huge evidence gaps in these areas. The findings and recommendations were translated into bite-sized practical learning for policy makers and practitioners and shared widely through newspapers articles, videos and CD-based toolkits.

RIGHT TO SANITATION

WSSCC in partnership with the Centre for Policy Research (CPR) in Delhi undertook research in three different Indian States of Rajasthan, Kerala and Uttar Pradesh. The research looked at the use of different legal and policy instruments as well as people's and duty bearers understanding of the Right to Sanitation and how it affects those who do not have access. In 2015 all the research outputs were finalized and several workshops were held in Rajasthan and Jaipur to share the findings and recommendations.

7 | FINANCIAL OVERVIEW

This section highlights WSSCC's financial performance in 2015. Overall the performance was solid with a financial delivery rate of 86%. The Global Sanitation Fund (GSF) delivery was in accordance with projected rates and involved balancing of implementation rates within a portfolio of 13 countries, where some are progressing well and others more slowly. The Sanitation Leadership Trust Fund (SLTF) continued to demonstrate the importance of WSSCC to the sector as a resource for policy advocacy and knowledge platforms committed to principles of equity and inclusion.

The expenditure totalled US\$ 34.8 million, 86% delivery rate against budget of US\$ 40.6 million. GSF delivered 95% and accounted for 73% of total delivery whereas SLTF delivered 68% accounted for 27%. The details of budget versus expenditures by trust fund are provided in Table 1 below. This represented a decrease of 1% or US\$ 0.2 million compared to 2014. GSF recorded 1% increase and SLTF 4% decrease. The details of this comparison are provided in Table 2 below.

Table 1: Comparison of 2015 budget and expenditure by trust fund – all amounts in US\$

Trust Fund	Budget	% of Total	Expenditure	% of Total	Delivery Rate %
GSF	26,671,537	66%	25,408,650	73%	95%
SLTF	13,940,976	34%	9,421,971	27%	68%
Total	40,612,513	100%	34,830,621	100%	86%

Table 2: Comparison of 2014 and 2015 expenditures and delivery rate – all amounts in US\$

Trust Fund	2014 Expenditure	2015 Expenditure	Expenditure Increase	Increase in %
GSF	25,234,494	25,408,650	174,156	1%
SLTF	9,794,673	9,421,971	(372,702)	-4%
Total	35,029,167	34,830,621	(198,546)	-1%

We achieved our great results thanks to the support and confidence of our donors that remain key strategic partners for WSSCC. The income in 2015 totalled US\$ 12.1 million from Governments of Australia, Finland, the Netherlands, Norway, Sweden and Switzerland. Table 3 below provides details by donor and trust fund.

Table 3: 2015 Income (including interest) by donor and trust fund – all amounts in US\$.

Donor	SLTF	GSF	Total	% of Total
Australia	394,636	394,636	789,272	7%
Finland	544,661	544,661	1,089,322	9%
Sweden	866,759	866,759	1,733,518	14%
Netherlands	–	4,600,000	4,600,000	38%
Norway	364,887	–	364,887	3%
Switzerland	1,057,961	2,115,923	3,173,884	26%
Interest	45,217	283,343	328,559	3%
Total	3,274,121	8,805,322	12,079,443	100%

WSSCC's overall cash management for the period January through December 2015 is provided in Table 4 below. It gives an overview of funding, expenditure and contractual commitments from January to December 2015 as well as breakdown by donor and per the two trust funds.

Table 4: Consolidated Finance Report for the period January to December 2015 – all amounts in US\$

Description of Income and Expenditures		SLTF	GSF	Total
Opening Balance as of 1 Jan 2015¹		10,824,282.60	50,712,206.16	61,536,488.76
Income	Income received in 2015	3,228,904.48	8,521,978.83	11,750,883.31
	Interest Income in 2015	45,216.63	283,342.68	328,559.31
	Total Income (A)	14,098,403.71	59,517,527.67	73,615,931.38
Expenditure	Disbursements	8,805,504.51	23,746,626.17	32,552,130.68
	Management Fee	616,466.02	1,662,023.66	2,278,489.68
	Project Capitalized Assets	6,379.32	–	6,379.32
	Total Project Expenses (B)	9,421,970.53	25,408,649.83	34,830,620.36
Ending Balance before adjustment of Contractual Commitments as at 31 Dec 2015;² (C= A-B)		4,670,053.86	34,108,877.84	38,778,931.70
Adjustment of Contractual Commitments³ on WSSCC Ending Fund Balance as of 31 December 2015				
Ending Fund Balance as of 31 Dec 2015 before adjustment of Contractual Commitments (D=C)		4,670,053.86	34,108,877.84	38,778,931.70
Contractual Commitments as at 31 Dec 2015				
	Multi-year country programmes	–	23,872,400.65	23,872,400.65
	Personnel, services and grants	8,462,320.98	4,788,923.67	13,251,244.65
Total Contractual Commitments, 31 Dec 2015 (E)		8,462,320.98	28,661,324.32	37,123,645.30
Ending Fund Balance as at 31 Dec 2015 after adjustment of Contractual Commitments (F=D-E)		-3,792,267.12	5,447,553.52	1,655,286.40

Notes:

- 1 Funding balance as at 31 December 2014 (balance brought forward from 2014) before adjustment of the contractual commitments that have now been included in the adjustment section below.
- 2 UNOPS operates on a cash basis and ending fund balance as at 31 December 2015 excludes contractual commitments for country programmes and contracts for staff and services concluded by 31 December 2015.
- 3 Contractual Commitments represent signed contracts and grants by 31 December 2015 for which period for delivery and payment fall beyond 2015. They include country programmes and contracts for staff and services.

8

STEERING COMMITTEE, NATIONAL COORDINATORS AND DONORS

STEERING COMMITTEE

REGIONAL MEMBERS

Kitchinme Bawa, Middle/Northern & Western Africa
Victor Chipofya, Eastern & Southern Africa
Anand Ghodke, South Asia
Khin Maung Lwin, South-Eastern / East Asia
Latin America (Vacant)
Audreyanna Thomas, Small Island Developing States
Otabek Bozarboev, Central & Eastern Europe,
West & Central Asia
Barry Jackson, Global/any region of the world
Dennis Mwanza, Global/any region of the world

PARTNER AGENCIES

Andy Cotton, WEDC
Sanjay Wijesekera, Active UN Partner Agency, UNICEF

EX-OFFICIO MEMBERS

Chris Williams, WSSCC Executive Director
Moin Karim, UNOPS Geneva Office, Host Agency
Bruce Gordon, WHO, Founding Host Agency
Brad Herbert, GSF Technical Advisory Committee Chair

PERMANENT NON-VOTING OBSERVERS

Marcus Howard, DFA&T, Australia
Anu-Elina Autio, Ministry of Foreign Affairs, Finland
Pim van der Male, DGIS, the Netherlands
Semund Haukland, NORAD, Norway
Johan Sundberg, SIDA, Sweden
Markus Bürli, SDC, Switzerland

PERMANENT NON-VOTING INVITEE

Junaid Kamal Ahmad, World Bank

NATIONAL COORDINATORS

Achille Lokossou-Dah-Lande, Togo
Aï Abarchi, Niger
Chea Samnang, Cambodia
Felix Adegnika, Benin
Guna Raj Shrestha, Nepal
Jane Nabunnya Mulumba, Uganda
Jean Herivelo Rakotondrainibe, Madagascar
Lovemore Mujuru, Zimbabwe
Michael Negash Beyene, Ethiopia
Ngabaghila Chatata, Malawi
Priscilla Achakpa, Nigeria
Shah Md. Anowar Kamal, Bangladesh
Tanya Khan, Pakistan
Tobias Omufwoko, Kenya
Wilhelmina Malima, Tanzania

DONORS

Government of Australia
Government of Finland
Government of the Netherlands
Government of Norway
Government of Sweden
Government of Switzerland

CELEBRATING WSSCC'S 25TH ANNIVERSARY

WSSCC celebrated its 25th anniversary in 2015. The Council was founded in 1990 through a United Nations General Assembly resolution (A/RES/45/181), originally to complete the unfinished work at the close of the International Drinking Water Supply and Sanitation Decade (1981-1990). During those 25 years, WSSCC has as a member organisation worked with many stakeholders ranging from technical experts, government officials and UN partners, to civil society, local communities and media; always aiming to create platforms for dialogue and action while supporting many WASH movers and shakers in their advocacy work for water, sanitation and hygiene for everybody.

To read testimonies of WSSCC's leaders, partners and members reminiscing the past 25 years, download the brochure at www.wsscc.org



JOIN US!
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