Clean water, decent toilets and good hygiene for everyone, everywhere
Joseph Siame, 34, a clinical officer at Busolwa Dispensary, standing in a ward after attending to his patients at Busolwa Dispensary, Nyang’wale District, Geita region, Tanzania.
Abbreviations and acronyms

CBWSO  Community-based water supply organisations
CBO    Community-based organisation
CP     Country Programme
CPS    Country Programme Strategy
CSO    Civil society organisation
DWA    District wide approach
EWP    Electronic water payment
HBC    Hygiene behaviour change
HBCC   Hygiene behaviour change campaigns
HCF    Healthcare facility
HSSP   Health Sector Strategic Plan
INGO   International Non-governmental organization

O&M    Operation and Maintenance
RUWASA Rural Water and Sanitation Agency
SDG    Sustainable Development Goal
SME    Small and medium enterprises
SWASH  School water, sanitation and hygiene
TOC    Theory of Change
VEMC   Village environment management committees
WASH   Water, sanitation and hygiene
WAT    WaterAid Tanzania
WSDPII Water Sector Development Programme Phase Two
WSDPIII Water Sector Development Programme Phase Three
WaterAid Tanzania (WAT) is a Country Programme (CP) and a functional office of WaterAid UK in the United Republic of Tanzania. Our vision is a world where everyone, everywhere has access to sustainable safe water, sanitation and hygiene. Since the start of our operations in the country in 1983, we have reached more than eight million people directly with water, sanitation and hygiene (WASH) services and more than twenty million people indirectly through Hygiene Behaviour Change Campaigns (HBCC).

WaterAid has developed a ten-year Global Strategy (2022–2032) reiterating its bold commitment to ending water, sanitation and hygiene crises together – for everyone, everywhere. WAT is developing this Country Programme Strategy (CPS) in Tanzania in alignment with the Global Strategy. It is informed by knowledge of Tanzania’s political economy and an analysis of the national context. It builds on our niche within the sector and best practice and past gains WaterAid has achieved.

Tanzania is a country of 62 million people, mostly living in rural areas. Access to water is compromised due to low functionality of water points, with 34% of these being non-operational. Only 13% of urban residents have access to functioning sewerage systems. Access to improved toilets at the household level stands at 66%, while less than half of the population have access to hygiene services. Over half of all healthcare facilities (HCFs) in Tanzania are not connected to a piped water supply.

Building on 40 years of commitment, trust and respect in delivering WASH services, WAT’s focus is on two key aims:

1. **To attain sustainable, inclusive and safe WASH services in targeted geographic areas for wider change.**

2. **To prioritise WASH across the health sector to improve public health.**

To effectively realise these aims requires scaling up models and influencing other actors. Our approach includes focuses on: strengthening WASH systems through service delivery; institutional capacity building; influencing key decision makers; establishing partnerships and alliances; campaigning for gender equality; generating evidence, and; learning and innovation.
Introduction

Since 1983, WaterAid Tanzania (WAT) has been a committed and trusted partner with the Government of Tanzania, complimenting their efforts to ensure everyone, everywhere has access to sustainable, clean water. Without inclusive and sustainable water, sanitation and hygiene (WASH), no one can live a full and healthy life. These three essential elements should be part of daily life for everyone, everywhere – but they are not.

Our vision is to achieve this for all. With four decades of technical experience and collective expertise, WAT is the largest, global not-for-profit organisation in the country that focuses solely on sustainable WASH. In the last 40 years, we have reached 1.8 million people directly with clean water provision, provided 800,000 people with decent toilets, and reached 26 million people with good hygiene promotion.

Our vision: A country where everyone, everywhere has sustainable and safe water, sanitation and hygiene.

Our mission: Transform lives through sustainable and safe water, sanitation and hygiene.

Our values: They define our culture and unite us across the many countries in which we work. They are at the very heart of WaterAid – who we are, what we do and how we do it. They are:

- **Respect:** We treat everyone with dignity and respect, and champion the rights and contribution of all to achieve a fairer world.
- **Accountability:** We are accountable to those we work with and to those who support us.
- **Courage:** We are bold and inspiring in our actions and words, and uncompromising in our determination to pursue our mission.
Collaboration: We work with others to maximise our impact, embracing diversity and difference in the pursuit of common goals.

Innovation: We are creative and agile, always learning, and prepared to take risks to accelerate change.

Integrity: We act with honesty and conviction, and our actions are consistent with openness, equality and human rights.

WAT’s vision: WAT’s vision is of a Tanzania where no woman or girl is forced to spend time walking and queuing for hours to collect water. We aspire to be a place where no community is held back by an endless cycle of sickness caused by broken and dirty water supplies and poor hygiene and sanitation. No girl should be excluded from a better future because her school does not have working toilets with locking doors or a menstrual hygiene facility. We believe that everyone can live a more fulfilled, dignified and healthy life with the opportunities that sustainable, inclusive WASH services bring.

WAT’s niche: WAT is working towards a time when everyone, everywhere has sustainable and safe WASH in Tanzania. This strategy will accelerate this process. Tanzania, like many other countries, believes in clean and safe water as the major pillar of sustainable development. As such, sustainable WASH services are paramount. We strive to ensure that everything we do with our partners and allies has the greatest positive impact on the lives of poor and marginalised people. Our strategy aims to motivate multilateral donors, the private sector, individual philanthropists and funding institutions to help solve the WASH crisis. This is our most ambitious strategy yet, and it demands greater collective effort by WASH actors and those outside the sector who are impacted by the crisis.

WAT will engage with and influence the Government, service providers, civil society organisations (CSOs) and all WASH actors to bring about effective change. This will act as the spark to reach unserved people in rural and urban areas with sustainable WASH. We will provide robust evidence and sound reasoning to demonstrate the positive impact of WASH on society, the economy and public health, and how it can create resilience to the effects of climate change and aid in poverty eradication. Our guiding principle is to reach underserved rural and urban populations, particularly those living in remote areas and forgotten or marginalised communities. Central to this is to ensure that women, girls, young people, and people with disabilities are at the heart of all we do.

This CPS outlines a five-year strategy for WAT. It contains information on the contextual situation, our role and value added in the WASH ecosystem in Tanzania and beyond, and the strategic aims and approaches that guide our work.

Our Global Aims:

- **Aim 1:** Achieve universal, sustainable and safe services in focused geographic areas to influence wider change.
- **Aim 2:** Prioritise WASH across the health sector to improve public health.
- **Aim 3:** Strengthen the resilience of WASH to climate change.
- **Aim 4:** Increase the quantity and quality of financing.
Mariam Juma walks for miles every day searching for water, thanks to our partners Serengeti Breweries Limited and the works of WaterAid Tanzania, her life and most of the women at Kwamaizi ward are about to change.
At 947,303 square kilometres (365,756 square miles) including the mainland and Zanzibar, the United Republic of Tanzania is the thirteenth largest country in Africa. It has a population of 61,741,120 million people (49% male, 51% female), with rural areas being more sparsely populated than urban.¹

Tanzania has sustained a long-lasting peace and stability with reliable national capacity to deliver its core services, including WASH. Tanzania has had strong macroeconomic performance, with growth in GDP at more than 6% over the past two decades, with the exception of the period during and after the COVID-19 pandemic when this fell to 2.1%.

National poverty levels, however, remain high. The rate was estimated to have declined slightly from 27.1% in 2020 to 27.0% in 2021, driven by a recovery in employment levels and non-agricultural business revenue.² Although poverty is traditionally a rural phenomenon in Tanzania, trends are changing fast and urban poverty in Tanzania is among the worst in Africa. Despite notable reductions from 2007 to 2012, poverty in urban areas, particularly in Dar es Salaam, remains high at 28%, with inequality continuing to increase. More than six million Tanzanians live in urban slums, a figure which is increasing annually by an average of 6%. Tanzania currently has the third highest growth rate of slums in Africa, with very poor conditions and a lack of WASH services.³

WASH provision in Tanzania varies between urban and rural areas, and from place to place. The Water Sector Development Programme Phase Two (WSDP II) Evaluation Report estimates average water access rates of 86% in urban areas and 72% in rural areas. However, the same report also indicates that rural residents’ access to water is compromised further by the non-functionality of 34% of the water points. Only 13% of urban residents have access to functioning sewerage systems leaving the majority exposed to the risk of environmental contamination and communicable diseases. Access to improved toilets at the household level is 66%, while less than half the population have access to hygiene services (i.e. handwashing facilities with soap and water). Water and sanitation services need to advance substantially to achieve the much-needed improvements in health and wellbeing that will help the country build resilience for the future and fulfil its true potential.

Over half of all healthcare facilities (HCFs) in Tanzania lack piped water supply, and of those connected, up to two-thirds report an irregular supply.⁴ Up to 44% of HCF consultation rooms and 42% of delivery rooms do not have functioning handwashing facilities. Handwashing soap was present in 51% of consultation rooms and 79% of delivery rooms.⁵ Only two-thirds of the HCFs provided patient with access to toilets. For girls, access to WASH facilities is a critical factor affecting school attendance, especially during menstruation and is one of the key reasons for girls to drop out. 34% of girls reported missing school during menstruation due to a lack of changing rooms and 26% blamed the lack of a clean and suitable toilet.⁶

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4. Up to 34% of surveyed HCFs by Malebo et al. (2019) reported irregular supply and 12.5% obtained water only seasonally
5. NIMR, 2016. Water, Sanitation and Hygiene situation in health care facilities in Tanzania mainland and way forward
For the past five years, the WASH sector has received an annual allocation of USD $300 million, which is far short of the amount required to achieve the Sustainable Development Goals (SDGs). According to the WSDP II Evaluation Report, WASH financing has been critically underfunded; only 47% of the planned USD $3.2 billion has been mobilised. Most WASH resources during this period were directed at water supply, which is seen to be the main driver of change and the preferred agenda of political leaders. This accounted for 81% of the budget allocated to the Ministry of Water budget in the financial year 2019/20, compared to only 6.4% allocated to the sanitation and hygiene improvement programme. Contributions by donors to rural water financing also showed a preference for water supply rather than sanitation. However, the WSDP III (2022-2026) has increased the WASH budget significantly, with USD $45,700,317 (0.7%) for water quality management, USD $2,601,417,108 (40.2%) for water supply, and USD $1,226,935,985 (19.0%) for sanitation and hygiene. These figures represent significant increases in allocations, especially for the latter. However, whether this ambitious investment plan can be realised remains to be seen.

A critical look at the sector in relation to the threats of climate change and continued population growth reveals major issues that impair the sector's performance: coordination of line ministries, departments and agencies for WASH and health; leadership and accountability at all levels; WASH financing, particularly of sanitation and hygiene; institutional capacity (including of individuals) to deliver and sustain WASH services; sustainability of services including operation and maintenance (O&M); data for evidence-based decision making; and awareness by citizens (including women and girls) of their rights to hold those accountable for the delivery of WASH. Overall, the main constraint for the sector continues to be investment in WASH sustainability. Most of the schemes supported by government and development partners are unsustainable due to a failure to focus sufficiently on O&M. The sector continues to suffer from limited involvement of WASH service users, inappropriate technologies, insufficient financial resources, and inadequate, overly centralised institutional frameworks that exacerbate the lack of WASH services.

On the other hand, the National Health Sector Strategic Plan July 2021–June 2026 (HSSP-V) Leaving No One Behind underscores the provision of WASH as key to preventing most communicable diseases. Similarly, there is political willingness to champion prevention as a better solution than treatment for communicable diseases. This constitutes a unique opportunity to profile water, sanitation and hygiene as essential elements of disease prevention at the national level. Tanzania has active networks and platforms that offer an opportunity for civil society engagement on WASH. Working effectively with such organisations will accelerate universal access to WASH in selected locations, thereby impacting public health outcomes.

Using system strengthening as a core response to systemic barriers, WAT will leverage action on institutional arrangements, coordination and integration, financing, WASH data to inform decisions, and accountability at all levels. WAT’s added value will be to build on previous experience with successful models of delivering WASH services and promoting hygiene behaviour change (HBC) for improved public health in selected geographic areas, healthcare facilities, schools and the community at large. WAT commits to pushing boundaries and positioning WASH as the catalyst for achieving sustainable development in Tanzania in the foreseeable future.
Our role

WAT has consistently focused on strengthening the systems that keep taps running, toilets working and make good hygiene habits a normal part of everyday life. We have an outstanding record of promoting gender-responsive WASH as central to health and education, and our work has significantly contributed to building resilience to the effects of climate change.

Our innovative programme implementation approach in the country has evolved to cater for the needs, challenges and emerging issues of the WASH sector. We have learned from experience, acting as a knowledge broker for adopting and scaling up innovations for better programme delivery. WAT's niche in the WASH sector consists of delivering and demonstrating sustainable services and management models.

Several of our approaches and models have stood the test of time, and have been adapted and scaled to national and global levels. These include: innovation in water purification through reverse osmosis technology; the cost-effective, simple water purification technology Nalgonda; Decentralised Wastewater Treatment Systems (DEWATS), and; electronic water payment (EWP) technology, among others. We have also worked to ensure hygiene is integrated into reproductive and child health as a core public health programme.

During the COVID-19 pandemic in 2020-2021, WAT successfully worked with the Government to address the underlying drivers of the pandemic through the national Nyumba ni Choo HBCC. To date, the speed and efficiency of this campaign has led it to reach more than 50 million people.

Julius Chisengo has been emptying pit latrines in Dar es Salaam for the past 18 years employed as an operator and uses a ‘gulper’, a manually operated hand pump that fits on top of a pipe rising out of a latrine pit, to lift waste out and into a container.
WaterAid’s role in the previous Country Programme Strategy

The above programmatic developments positioned WAT to assume a leadership role in technology innovation and design approaches for WASH, and address the needs of the sector. The previous evaluation of the CPS confirmed the deep-rooted impacts it achieved and our added value to the sector. The evaluation indicated that WAT bridged the gap between national, regional and district-level WASH players to effectively respond to WASH needs.

Additionally, evidence indicated the programmatic developments led to strong networking and collaboration for better WASH services. This was achieved through a strategic partnership portfolio, including WASH networks, professional health associations, the private sector and political platforms. WAT continues to show strong technical capacity and skills to demonstrate, innovate and propose climate-resilient WASH solutions.

Key lessons to take forward

1. **WASH system strengthening is key to sustainability:**
   Challenges to the sustainability of WASH facilities are not caused by any single factor, but by the collective effects of a wide range of interacting factors related to WASH building blocks. WAT’s experience of the HBCC programme, which was implemented in 30 schools and 15 HCFs in Kisarawe, Pwani region, clearly demonstrated management, coordination and integration between the water and health sectors. We have learned that system strengthening requires robust partnerships, is time consuming, and needs more research and commitment.
2. Gender inequality must be addressed purposefully: Over the timeframe of the previous CPS, gender representation and empowerment were evidenced in the water management committees, village environment management committees (VEMC), community-based water supply organisations (CBWSO) and small and medium enterprises (SME). We learned that it is important to prioritise poor and vulnerable groups, including women and children, in programmes and policies, to allow their voices to inform the approaches used, address any disparities and ensure a specific focus on gender equality.

3. Innovation and technologies to ensure sustainable WASH services and behaviours:
The use of solar power, EWP and water treatment solutions has resolved some of the critical problems caused by the lack of sustainable energy needed for WASH services, financial management and water quality. WAT set up modern technology plants such as the reverse osmosis plant in Arusha to address these water quality challenges. This plant provides 20,000 people with clean water and specifically addresses the challenge of removing excess fluoride harmful to people’s health.

Another affordable and easy fluoride removal solution known as Nalgonda has been implemented in Basutu, with the result that the Hannang community now has access to clean water, free from fluoride and other contaminants. We have learned to collect workable solutions according to the particular needs of each setting, and to adopt and test technologies with the aim of improving sustainability, inclusivity and resilience.

Our future contribution
This strategy is based on the reputation, credibility, reliability, competence and innovations for excellence that we have developed over time. Modelling innovative service delivery, technologies, models and tools will remain central to WAT’s work, followed by strategically influencing the scaling of successful innovations. For this to happen, WAT will: deliver gender-responsive and climate-resilient WASH services; conduct operational research; document evidence; build partners’ capacities; and develop dynamic collaborations and partnerships between the Rural Water and Sanitation Agency (RUWASA) and utilities, councils, parliamentarians, non-state actors, donors and the private sector. WAT will advocate for the adoption and scaling of workable innovative technologies and approaches within and beyond the CP through relevant ministries and other platforms.

WAT will play an empowering and supporting role to CSOs to mobilise citizens to voice their rights for inclusive WASH service delivery in targeted HCFs, schools and communities. We will lead in coordinating and hosting strategic dialogues within the sector and strengthen the consultative process of achieving broader change in WASH access within Tanzania.
Students from Kihare primary school washing their hands with clean water and soap on newly constructed handwashing facilities at Kisarawe district, Pwani region, Tanzania.
We have made a strategic choice to focus on the following two aims:

- **To achieve sustainable, inclusive and safe WASH services in targeted geographic areas for wider change.**
- **To prioritise WASH across the health sector to improve public health.**

This section provides a description of these aims, with a summary of how the strategy will be implemented and their expected outcomes.

**Aim 1: To achieve sustainable, inclusive and safe WASH services in targeted geographic areas for wider change**

SDG 6 sets targets that require a fundamental shift in approach if the global commitment to universal and equitable access to WASH is to be achieved. Tanzania, like many other countries, faces significant barriers to delivering universal, sustainable and safe WASH, resulting in long-term initiatives that do not fail. The severity of this problem underlines the need for intensive and targeted work to strengthen the WASH system in order to deliver change at significant scale.

Our CPS Evaluation 2016-2021 indicated that scaling up access to innovative WASH facilities in rural Tanzania is still needed. WAT will build on innovative models, approaches and programmes to showcase how barriers can be overcome through evidence and lessons learned. These can then inform and influence those in power to foster changes beyond a particular geographic area. The District Wide Approach (DWA) was identified as an untapped opportunity to increase synergy and effectiveness.

We understand that in line with this aim, it would be necessary for WAT to focus on fewer districts and conduct pilot projects with government structures, community-based organisations (CBOs) and non-governmental organisations (NGOs) if this is to be achieved. In understanding the importance of this, WAT will explore opportunities to further our WASH service delivery while influencing others in areas we have previously worked in.

Throughout the duration of this strategy, we will work at national and sub-national levels while focusing on three key areas: **developing WASH mapping in selected geographic areas; developing costed district plans, and; strengthening sector influencing.**

We will develop firm foundations for comprehensive (universal) access to WASH services in these locations that will be evaluated in 2025 to allow full scale implementation through the subsequent strategy. More lessons from sectors that have used the DWA approach successfully will be explored in Africa and beyond.

**Why?**

WAT has extensive experience in working at the sub-national level. Since decentralisation of the WASH sector requires system strengthening to deliver services, we will use our experience to work at the sub-national level to deliver the desired changes (for example, our work in different regions with RUWASA districts).

We have accumulated experience in implementing a rapid, comprehensive programme for sustainable WASH at all levels (i.e. public institutions and communities) within a specific geographic area. This means building universal access into existing modalities to achieve the impact we want to see for everyone, everywhere, and putting women, girls and young people at the centre of programming decisions.
There is also political willingness and commitment to universal access, with the slogan of Tanzania’s President being “Kumtua mama ndoo kichwani” (“take the water bucket down from a woman’s head”). The capacity needs assessment conducted for RUWASA in 2020 stated that the best approach to ensure political commitment is to take forward District WASH Master Plans as a blueprint to achieving universal access.

How?

Detailed WASH assessments will be conducted in the regions that received investment by WAT in the previous strategy. These will inform the final selection of the most WASH-stressed districts as the focus of the latest strategy. This will then allow the development of a comprehensive WASH investment plan that brings all stakeholders together to deliver SDG 6, and calls on the Government to increase WASH budget allocations and ensure their timely disbursement to deliver services to everyone.

WAT will create clear lines of responsibility, effective partnerships, sustainable financing arrangements and accountability mechanisms. We will partner with the Government, donors, INGOs, CSOs, the private sector, rights-holder groups such as women’s groups, organisations of people with disabilities, pro-feminist men’s groups and communities to deliver WASH investment plans in selected areas, and model this approach for scaling within and beyond the country programme. We will target overlapping delivery of WASH services and HBC in the same geographic area and across ministries, with a clear focus on influencing and advocacy to inform service planning in both specific areas and beyond.

Outcomes

The outcomes of this aim for the selected locations are:

- a district costed plan to secure commitments and investments for WASH;
- gender-sensitive and climate-resilient WASH services modelled for scaling up;
- improved and informed decision-making for WASH, and;
- relationships brokered to aid coordinated delivery of the DWA approach.
Aim 2. To prioritise WASH across the health sector to improve public health

In the previous strategy, we made a remarkable progression into institutional WASH, particularly in school water, sanitation and hygiene (SWASH) and healthcare. In this way, WAT has a leadership role in coordinating, supporting and hosting technical and strategic discussions within Tanzania’s sector and political fora, the wider sector, and across the WaterAid federation at international level.

We believe the focus on prioritising WASH in public health should continue to capitalise on lessons learned and gains already made in recent years. For example, WAT supported the development of national standard guidelines such as the WASH in HCFs and School WASH Guidelines being used nationally. This aim has been selected after a thorough analysis of the remaining challenges and priorities of the Government of Tanzania and other stakeholders for WASH in public health.

Why?

WAT is nationally renowned and respected for innovatively embracing issues of WASH in public health in our previous strategy, as demonstrated by WASH in HCFs in Geita, Singida and Pwani regions. Subsequently, HBC programmes have been the catalyst for multiple approaches to sustaining hygiene behaviour across the country. We became a lead technical advisor supporting the development of sector guidelines, strategies and related documents to maximise the impact of WASH delivery for excluded people and communities.

WAT would like to build on this niche position by playing an advisory role, promoting and building capacities on best practice to deliver WASH in HCFs and HBC. Political willingness creates chances to champion prevention of communicable diseases as a better solution than treatment. Furthermore, opportunities for civil society engagement with appropriate networks and platforms will increase the impact of public health initiatives in the sector and promote universal access in selected districts. This will result in impactful change by demonstrating low-cost interventions to key sector players and promoting policies, guidelines, standards and tools to improve WASH.

Overall, achieving universal, lasting access to WASH services will not be possible without working with the health sector. Therefore, this is an opportunity for WAT to strengthen our work with the health sector and increase capacity, leadership, coordination and accountability in the promotion of WASH using holistic and multidisciplinary solutions. As we implement universal WASH in HCFs and HBC in specific districts, we will advocate, promote and work with others to scale up tried and tested innovations from our work in HCFs in other districts.

How?

First, we will focus on integrating HBC into core public health programmes and policies. Second, we will improve the quality of care in HCFs with inclusive and sustainable WASH services. Third, we will promote ownership and responsibility for WASH by the health sector.

This will be achieved through a system strengthening approach and by influencing decision makers to prioritise WASH in national health development budgets. We will support coordination among WASH stakeholders (with joint planning and budgeting/financing) to ensure all agencies are aligned with comprehensive, area-wide strategy and policy.
Our work will revolve around modelling innovative services, that catalyses the attainment of universal WASH access in HCFs, and HBC programme in targeted areas. We will ensure comprehensive monitoring and accountability mechanisms within the sector while safeguarding the needs of marginalised groups such as women, girls and young people.

We will include evidence from implementing our programme and from relevant research to inform lessons on scaling up. This will support our case for greater investment in WASH to ensure far reaching change beyond the targeted districts.

Joyce Samuel, 32, is no longer walking for miles searching for water, all she has to do is drop a coin at the water point to get clean and safe water near her house.

Outcomes

The outcomes of this aim for the selected locations are:

- healthcare facilities with sustainable, safe and inclusive WASH services that meet or exceed national targets;
- inclusive and effective HBC interventions in one to two core public health programmes, and;
- prioritisation of WASH by the health and other supporting sectors in planning, processes, policies and budgets.

Adaptive programming

This approach sees prioritisation of WASH for public health as a means to an end rather than an end in itself. Therefore, WAT will continue to prioritise WASH and SDG 6 commitments and its integration with other SDGs as the ultimate ambition.

In this strategy, WAT will increase the quantity and quality of WASH financing to strengthen the climate resilience of WASH as a cross-cutting priority. Climate change can adversely impact the availability of water supply and the efficiency of local sewerage systems, and without finance, the Theory of Change (TOC) will not be possible. Developing models for scalable, climate-resilient WASH and encouraging responses to climate change in sector policies, programmes, plans and budgets are key, since climate change poses substantial risks to any gains made in WASH.

We will continue to deploy adaptive programming, where interventions will document, review and capture feedback from key stakeholders, including the communities we work with.

Lessons learned will consistently inform our programme development, implementation, and influence and advocacy work within Tanzania. In the event that WAT is required to respond to unexpected emergencies that might risk the implemented programmes, we will respond, reflect and learn lessons to increase future prevention and preparedness. These include events such as the COVID-19 pandemic, floods, droughts, extreme weather patterns and other shocks.
A sanitation worker from Hekima Kwetu Sanitation Group cleaning toilets with sanitation supplies provided by WaterAid at Chanika Maternal and Child Hospital in Dar Es Salaam region, Tanzania.
Our approach

We will include system strengthening as a core element of adaptive programming to address WASH challenges. We will balance our work on modelling innovations in climate-resilient WASH services, research and learning, building partnerships and alliances, influencing, gender equality, and empowering and supporting CSOs.

We have a strong record of generating evidence and knowledge that supports the implementation of innovative and sustainable programmes, enabling access to WASH for marginalised people. We have established strategic working partnerships with government agencies and research and academic institutions to build innovative WASH facilities that are informed directly by our programmes, and that also inform wider changes in service delivery and behaviour change.

WaterAid has been at the forefront of empowering civil societies and community voices. It has supported the establishment of the first national WASH network, the Tanzania Water and Sanitation Network (TAWASANET), whose membership includes national and community-based sector organisations. CSOs have bridged the gap between national, regional and district-level WASH players, and have promoted accountability in response to the WASH needs of communities across the country.

Representation of women on water management committees, VEMCs and CBWSOs demonstrates progress. WASH SMEs owned by both women and men have been empowered. However, more in-depth analysis is needed to address the fundamental issues of gender inequality and women’s empowerment beyond the ‘face value’ equal representation at committees.

WaterAid/Immanuel Harry

With clean and safe water, Magreth and other students now don’t spend hours searching for water instead of studying at Kihanju village, Itigi District, Singida region.
Building on previous approaches and lessons from the last strategy, our cross-cutting approaches will be:

**Innovative modelling services**
There are clear examples of how WAT has contributed to stronger systems for the WASH sector in Tanzania. By keeping ahead of other WASH actors through innovation and testing viable technologies and approaches for sustainable services, WAT remains a trusted partner for the delivery of WASH services and behaviour change. Our work will focus on delivering infrastructure that safeguards the needs of marginalised groups such as women, girls and young people, both in public institutions and the wider community.

**Research and learning**
We will use findings from our programmes to inform scaling processes, influencing and the case for investment. Our approach will enable mutual learning, ownership of results, translation into policies and programming, and sustainability. This will include linking with CBOs and NGOs working on the ground to share knowledge and adopt workable solutions.

**Partnership and alliances**
We look forward to sustaining our working relationships with the Government and its agencies, and strengthening our leverage of partnerships with INGOs, CBOs and CSOs. CBOs and CSOs will provide the delivery of system strengthening and infrastructure development, and act as enablers to fast track universal access targets. We will use the lessons learned from working with the private sector to scale and broaden these gains and drive the WASH agenda forward. We will intentionally partner with a gender-based organisations to incorporate knowledge and approaches used into programme development, implementation and monitoring.

**Empowerment and support of CSOs**
We will support initiatives that track sector progress and mobilise citizens to speak out for their rights to inclusive WASH services in targeted HCFs, schools and communities. This will engage women, girls and young people to increase their capacity to demand their rights.

**Influencing**
We will engage with key sector actors and provide evidence to trigger discussions in national forums, events and dialogues, and address bottlenecks in WASH delivery at national and sub-national levels. Our work will focus on realising existing target commitments in the sector. We will also influence the scaling up of cost-effective problem-solving innovations and support communication for visibility and marketing of this new strategy.

**Gender equality**
We will integrate gender and women’s rights’ issues into our programming and conduct assessments of the impact lack of WASH has on gender equality. We will do this by focusing on women, girls and young people in project locations and responding to identified priority needs. Improved WASH services will increase the time available to women for economic activities and for participating in leadership and decision making. We will advance gender equality in WASH long term through changes to operating norms and systems, and actively take a do no harm approach through our implementation of gender-responsive WASH.

Our partnerships will focus on organisations supporting women and young people, and therefore help scale up gender integration across our programming. We will engage men and boys on the topic of gender equality and redistribute the burden of unpaid WASH work more fairly between men and women, boys and girls. This will involve: tackling harmful social norms and stereotypes that impose constraints on women through WASH and their lives more generally; increasing women’s leadership and decision making status; modeling best practice on gender-based WASH solutions; reducing women’s unpaid labour in WASH and care burdens; addressing gender-based violence, and; providing leadership on menstrual health in WASH. This will help to better address the inequalities of WASH access within the communities we serve.
Major shifts in strategy

We recognise significant changes in global, national and local contexts since the last strategy period. These include the effects of the COVID-19 pandemic, the heightened impact of climate change, shifts in the donor landscape, population growth, rapid urbanisation, inflation, and the increased demand for better and sustainable WASH services. These changes necessitate that we take a critical look at our role, niche, added value and the ways we meet our commitments. WAT is looking for a step change in approaches, engagement and delivery in the following areas:

- Narrowing down our geographic scope to work more intensively in fewer places for greater impact.
- Applying a cross-cutting gender lens across all our work for gender rights transformation.
- Increasing private sector engagement.

A critical look at our delivery practice has also identified areas for improvement, particularly in clear documentation and packaging of best practices and lessons learned from the implementation of our previous strategy. These have highlighted inadequate O&M of protocols for handing over innovative projects to the Government, leading to an ineffective management system and a lack of ownership by the responsible authorities.

Moreover, limited institutional capacity to resolve technical problems onsite suggests there were gaps in knowledge and technological transfer from foreign providers, vendors and experts to the local authorities or resource persons. While the TOC identified both active community engagement and influencing as necessary conditions for change to happen, outcomes such as mobilised citizens demanding services for the bottom 20% of society were not evident during the previous five years. This might have been due to a lack of strategic guidance and focus on how to effectively influence for greater accountability at all levels.

In Machochwe village, we have implemented a water kiosk to support farmers and those in their community with improved health and work outcomes through clean and safe water access.
Resourcing the strategy

Internal changes to make things happen

To deliver our strategy over the next five years, significant internal changes will be made. We will continue to develop our renowned culture of innovation and strong employee involvement.

We will build the internal skills and capacity to work adequately, safely and legitimately on gender equality issues and to tackle any constraining biases and assumptions. We will continue to build the leadership abilities needed to deliver this strategy.

Funding our work

We will increase our income to a target of TSh. 6-10 billion per year during the next five years to guarantee our plan is achievable and effective. We will establish new relationships, maintain and strengthen existing partnerships, and strengthen our presence within the country to support increasing WASH demand.

WAT will continue to support fundraising for the sector – specifically to build the capacity of CSOs and other, newer institutions in WASH, and help them put WASH at the core of their national priorities. We will also partner with the private sector to support sustainable returns to the community, and strategically advocate for large institutional water users to give to the community in kind through different projects and initiatives.
A 10,000-litre water tank constructed by WaterAid Tanzania at Busolwa Dispensary, Nyang’wale District, Geita region, Tanzania.
WaterAid is an international not-for-profit, determined to make clean water, decent toilets and good hygiene normal for everyone, everywhere within a generation. Only by tackling these three essentials in ways that last can people change their lives for good.

Front cover: The availability of water at Kihanju village means that Monica won’t spend hours searching for water with her daughter in her back.