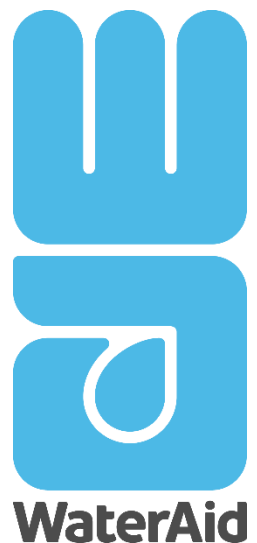


CONCEPT NOTE

WaterAid's Programme and Advocacy Response to COVID-19



Date: 18th May 2020
Version: 1.0



Introduction

WaterAid has been working alongside partners for over 35 years in some of the poorest and most marginalised communities to reach over 25 million people with clean water, 25 million people with decent toilets and 18 million people with good hygiene.

In this COVID-19 crisis, Water, Sanitation and Hygiene (WASH) plays a fundamental role in preventing transmission of disease, contributing to health and well-being and protecting the vulnerability of the poorest and most marginalised.

WaterAid is working fast, across 26 countries, to establish hygiene behaviour change programmes; to install handwashing facilities where they're needed most; to provide the essentials so people can wash their hands thoroughly; and to share the simple but vital steps we must all take to change our hygiene behaviours and keep each other safe. But the pandemic is escalating rapidly, and we need to do even more right now in countries with already fragile health systems, to protect as many people as possible and to prevent a humanitarian catastrophe.

Over the next 12 months WaterAid is planning to implement a comprehensive package of programme and advocacy interventions to strengthen the WASH sector in target geographies and build resilience to the impacts of COVID-19.

We are looking for National governments, sub-national authorities and major bilateral and multilateral donors to support WaterAid's programme and advocacy response to COVID-19.

Context

COVID-19 is an unprecedented global crisis and continues to rapidly spread around the world. As of early May 2020 the number of confirmed global cases has exceeded 3.8m million across 187 countries / territories. The global death toll stands at over 270,000.

COVID-19 has highlighted and exacerbated existing inequalities in wellbeing and human rights, including access to water, sanitation and hygiene, for communities in poverty and particularly women, girls and those in densely populated informal settlements.

The Importance of WASH in tackling COVID-19

The World Health Organisation (WHO) Interim Guidance "Water, sanitation, hygiene, and waste management for the COVID-19 virus" published on 23 April 2020 states that the provision of safe water, sanitation and hygienic conditions is essential to protecting human health during all infectious disease outbreaks, including the COVID-19 outbreak. Ensuring good and consistently applied WASH and waste management practices in communities, homes, schools, public places and health care facilities will further help to prevent human-to-human transmission of the virus that causes COVID-19.

As well as the immediate task of fighting the spread of COVID-19, access to safe water and sanitation services and hygienic practices are critical for building the defences and resilience to future global disease outbreaks. However, 1 in 10 people around the world don't have access to clean water and 2 in 5 people lack handwashing facilities at home.



WaterAid Nepal is supporting the Government's campaign prevent the spread of COVID-19 using national radio, TV and by mobilising celebrities. We are also installing innovative hand's free (contactless) handwashing in public places.

Currently WASH is not being prioritised as a core element of COVID-19 preparedness or response, and where it is included, it is generally only emergency temporary measures focused in urban areas rather than sustainable system-building for universal services.

Urgent action is needed to promote hygiene practices as one of the most vital defences against the spread, containment and treatment of COVID-19 and other diseases and to provide safe access to improved water, sanitation and hygiene facilities in communities, health care facilities (HCFs), schools and workplaces.

WaterAid Expertise

WaterAid was founded in 1981 by the UK water industry—a single international organisation dedicated to the water crisis. Now, we are an international not-for-profit and a global leader in WASH and hygiene promotion and behaviour change, operating in 34 countries, with 7 national members; Canada, US, UK, Sweden, India, Japan and Australia. We collaborate with governments, the private sector, research institutes and NGOs to improve sustainable development goal outcomes.

WaterAid has unique credibility, technical experience and established relationships and a strong base of advocacy that we can draw upon:

- **Hygiene is a core part of our expertise**, and joint efforts with governments on nationwide hygiene behaviour change campaigns are planned or underway in many of our country programmes
- At the heart of our long-term strategy is our work with governments to **develop and strengthen planning, implementation and monitoring systems** as part of their national development plans, and with service providers to **develop and strengthen their technical capacity and systems to deliver sustainable water, sanitation and hygiene services**.
- We have **strong partnerships** with **governments** and **civil society groups** in the countries where we work.
- We are a member of the **COVID-19 Hygiene Hub**, a joint initiative funded by DFID pooling expertise to provide a free service to help actors in low- and middle-income countries rapidly share, design, and adapt evidence-based hygiene interventions to combat COVID-19. We have also established an internal global technical advisory group to support the actions in different countries that includes behaviour change scientists and public health experts from WaterAid UK, the London School of Hygiene and Tropical Medicine, and WaterAid regional offices.
- Through our **WASH and Health programmatic work** and 'Healthy Start' advocacy over the past five years, we have positioned ourselves as **influential and credible actors on WASH-Health integration** with robust evidence of policy and programmatic solutions and strong understanding of the 'actors and factors' at national levels.
- We are able to draw on and communicate a **strong evidence and research base** about the multiple health, social and economic benefits of WASH service provision, including from our own programming, our relationships with wider WASH sector actors, and academia.

WaterAid's Response

Globally, our programme and advocacy response to COVID-19 aims to strengthen WASH systems to be more resilient to COVID-19 outbreaks, to support governments to take action towards having universal, inclusive, equitable and sustainable WASH services and systems, and to contribute to a stronger health response to current and future COVID-19 outbreaks and other health crises, with a particular focus on at-risk communities such as the poorest communities, those living and working in densely populated areas, those in COVID-19 quarantine/isolation centres, and women-led households.

Theory of Change

Our global high level COVID-19 response Theory of Change outlines six action areas that we will focus on when designing, setting-up and implementing programme interventions in response to the COVID-19 crisis.

The six action areas are, 1. Monitor and assess the situation on the ground, 2. Plan, resource and coordinate with stakeholders, 3. Ensure WASH services are accessible, 4. Enhance WASH behaviours and practices, 5. Advocate for better WASH services and 6. Learn and adapt.

Our simplified Theory of Change (refer to Figure 1) sets out how each of the action areas contribute to short term, medium term and longer terms outcome areas, how these outcome areas are inter-related, and how each of the action areas contribute to improving WASH / COVID-19 behaviours in communities, HCFs, schools and workplaces, and a strengthened WASH sector that is more resilient to COVID-19 outbreaks.

In the **short term (and to date)** we have been focusing on hygiene behaviour change to enhance the understanding of the target populations on the need for good hygiene practices, enhancing access to safe and improved handwashing facilities through the provision and rehabilitation of facilities and supplies, and enhancing stakeholder preparedness and coordination by engaging with and providing support to Government and local actors. Some example short term outcomes are:

- i. WASH stakeholders are coordinated and better prepared to support the continuity of WASH services in the target geographies. (This outcome links to short term outcomes ii. and iii. and medium term outcome i.)
- ii. Targeted decision makers/policy makers are prioritising/incorporating WASH within their COVID-19 response, especially hygiene response and WASH in HCFs. (This outcome links to short term outcome iv. and medium term outcome ii.)
- iii. Target at risk populations have safe access to improved handwashing facilities through the construction of new and repair of non-functional facilities, or through temporary/mobile supplies/services where necessary. (This outcome links to medium term outcome iii.)
- iv. Target populations in the target geographies have enhanced understanding of how to reduce transmission at WASH facilities/ in the home/ institutions through good hygiene practices. (This outcome links to medium term outcome iv.)



WaterAid Pakistan is leading countrywide awareness campaigns in regional and local languages; focusing on handwashing with soap and social / physical distancing.; and using FM radio, local cable networks and SMS to reach 22.6 million people across the country.

Our activities and outcomes during the shorter term will in turn support and help catalyse outcomes in the medium term.

In the medium term, we will focus on supporting stakeholders to ensure the continuity of WASH services, enhancing access to safe and improved WASH services, improving hygiene behaviour and practices, and advocating for stronger sustainable WASH systems with Governments. Some example medium term outcomes are:

- i. Target WASH service providers are focusing on enabling continuity of the WASH service for target populations (e.g. poorest and marginalised) - They have enhanced capacity (plan/systems in place, resources, knowledge, skills) to ensure continuity of supply. (This outcome links to medium term outcome ii. and long term outcome iv.)
- ii. Targeted decision makers/policy makers are continuing to prioritise/incorporating WASH within their COVID-19 response, and demonstrating commitment to scaling up investment and action towards

universal sustainable WASH services, and the systems required to support this, prioritising the poorest and most marginalised, recognising WASH as a first line of defence against future health crises. (This outcome links to medium term outcome ii.)

- iii. Target at risk populations have safe (considering safeguarding and security) access to improved WASH services through the construction of new and repair of non-functional Water and sanitation facilities, or through temporary/mobile supplies/services where necessary. (This outcome links to medium term outcome iv. and long term outcome iv.)
- iv. Target populations are increasingly practicing COVID-19 related WASH behaviours in the community, HCFs, schools, and workplaces, to protect themselves, families, communities, colleagues, staff and students. (This outcome links to long term outcome iv.)

Our activities and outcomes during the medium term will in turn support and help catalyse outcomes in the longer term.

In the longer term we will focus on strengthening WASH services and systems to build resilience to current and future COVID-19 outbreaks and enhancing the evidence base to support ongoing improvements in policy and practice. Some example longer term outcomes are:

- i. Target at risk populations have safe (considering safeguarding and security) access to improved WASH services through the construction of new and repair of non-functional Water and sanitation facilities, or through temporary/mobile supplies/services where necessary. (This is a continuation of medium term outcome iii. and links to long term outcome iv.)
- ii. Targeted decision makers/policy makers are continuing to prioritise/incorporating WASH within their COVID-19 response, and demonstrating commitment to scaling up investment and action towards universal sustainable WASH services, and the systems required to support this, prioritising the poorest and most marginalised, recognising WASH as a first line of defence against future health crises. (This is a continuation of medium term outcome ii. and links to long term outcome iv.)
- iii. The evidence base on the role of WASH in COVID-19 response is strengthened internally and externally to advance internal and external practice and policy. (This outcome links to long term outcome iv.)
- iv. WASH systems are strengthened and more resilient to current and future COVID-19 outbreaks

The combination of the short, medium and longer term outcome areas will enhance and improve resilience to current and future COVID-19 outbreaks and other health crises, contribute to a stronger and more resilient health response to COVID-19 and help to reduce the impacts of COVID-19 by controlling / preventing its future spread.

Principles of Working

Using our do no harm, gender sensitive, inclusive approach WaterAid countries will adopt the following principles when designing and implementing programme and advocacy interventions:

1. Safeguarding of staff and communities and prevention of exploitation and abuse (PSEA) in times of crisis.
2. Security of staff, partners and the communities we serve.
3. Equality, Inclusion, and Human Rights for poorest and most marginalised groups.
4. Adherence to risk critical programme quality standards.
5. Collaboration with other organisations.
6. Adaptive and agile in our management approach.

Geographies

WaterAid delivers programmatic work in 26 countries¹ in Africa, Asia and Central / South America. In each of these countries WaterAid has strong relationships with national governments, local governments, other INGOs, NGOs and civil society groups, and as an immediate response to COVID-19 we have already been proactively scaling-up our work through government led mechanisms using appropriate means of communication.

In many of these countries we are already partnering with Governments to roll out nationwide or large-scale hygiene promotion initiatives and adapting our existing hygiene behaviour change campaigns to help control or prevent the further spread of COVID-19. The programme and advocacy interventions that will be implemented as part of this response to COVID-19 build on the initiatives and activities that are already underway, and form part of a more comprehensive response to COVID-19.

As each country is unique, the appropriate COVID-19 response programming will vary based on the incidence of the pandemic, government policy, political opportunities, characteristics of the community, the needs on the ground and local capacity to implement strategies.



WaterAid eSwatini is working with the Prime Minister's Office to utilize their existing handwashing promotion campaign materials as well as handwashing facilities to target 150,000 people.

¹ India, Pakistan, Nepal, Bangladesh, Myanmar, Cambodia, Timor-Leste, Papua New Guinea, Ethiopia, Uganda, Rwanda, Tanzania, Malawi, Mozambique, Madagascar, Swaziland, Zambia, Nicaragua, Colombia, Sierra Leone, Liberia, Mali, Burkina Faso, Ghana, Niger, Nigeria

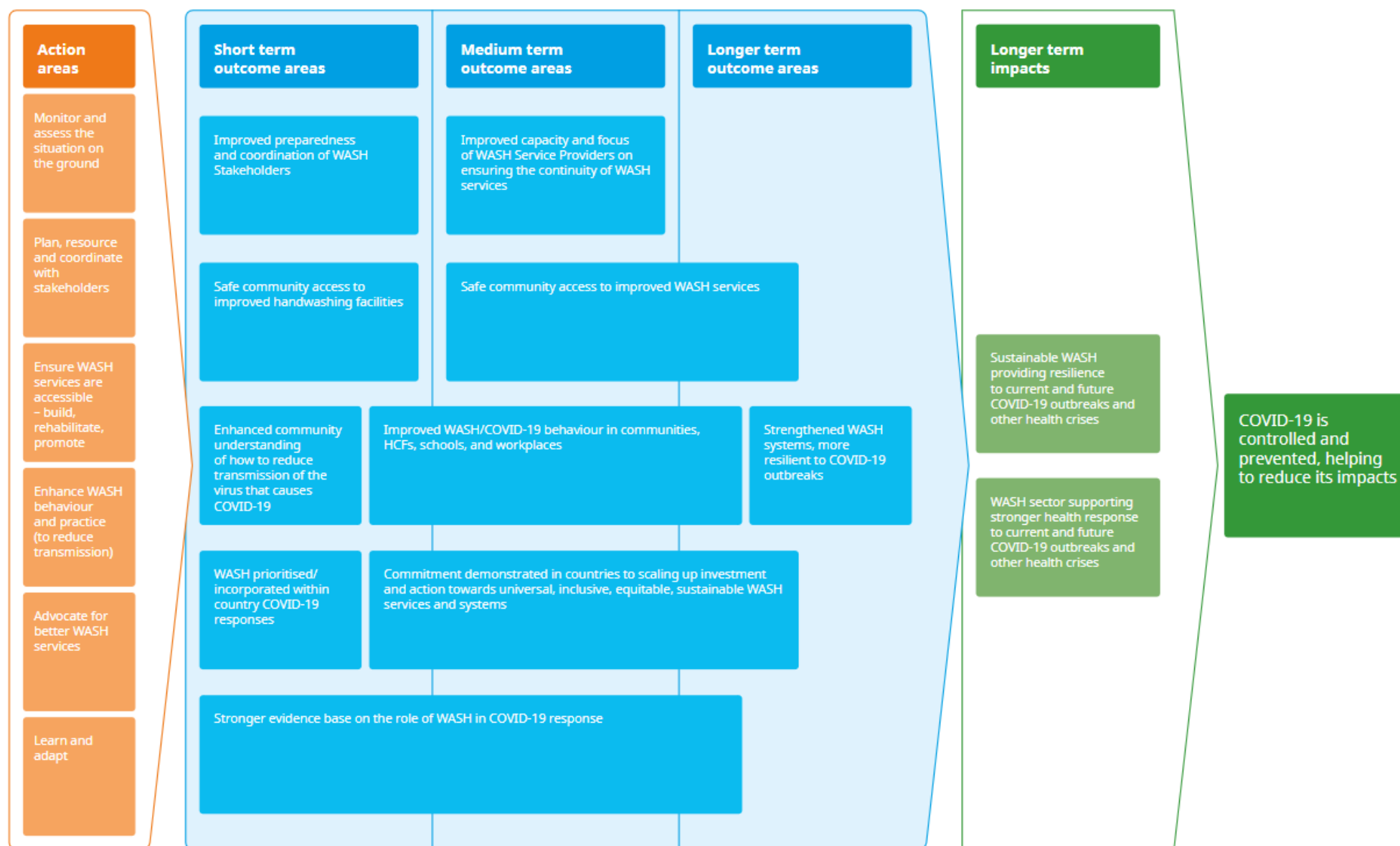


Figure 1 –Theory of Change for COVID-19 Response