

WaterAid Nepal Country Programme Strategy 2023–28

**Clean water, decent toilets and good
hygiene for everyone, everywhere**



WaterAid

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● Front cover: Sonali, 10, Pabi Maya's niece, washing her face, Lapilang, Kalinchowk Rural Municipality-5, Dolakha. September 2022.

● Below: Child, gender, disabled-friendly toilet at Pashupati Secondary School ward 15, Lahan Municipality, Siraha supported by The Beacon project.



At a glance

Nepal Country Programme Strategy 2023–28

Our vision

Everyone in Nepal has sustainable and safe water, sanitation and hygiene.

Our mission

Transforming lives through sustainable and safe water, sanitation and hygiene.



Aim 1

Selected municipalities make significant progress towards **universal access** to safe and sustainable WASH to influence wider change.

- Modelling universal WASH in at least one area at sub-national level (households, schools, healthcare facilities)
- Management and delivery models for resilient WASH services
- Strengthening WASH systems

Aim 2

Gender-responsive WASH is prioritised for improved **public health**.

- Hygiene promotion in routine immunisation (nationwide)
- WASH in healthcare facilities
- Menstrual health and hygiene



Financing WASH (cross-cutting)



Hygiene behaviour change (cross-cutting)

Our values

- Respect
- Accountability
- Courage
- Collaboration
- Innovation
- Integrity

Our role

- Change agent
- Advocate of gender-responsive WASH
- Technical support hub
- Knowledge partner
- Innovation champion

Our reach

- At least 10 local governments/ municipalities
- Three provinces – Madhesh, Bagmati and Lumbini
- Nationwide hygiene promotion
- 585,000 people with sustainable and safe WASH
- More than 1 million people through hygiene promotion

Our approaches

Deliver services, build capacity, influence

Gender equality and social inclusion

Partnerships and alliances

Evidence, learning and innovation



WaterAid/Mani Karmacharya

Introduction

The importance of water, sanitation and hygiene (WASH) in human development and resilience is evident. In 2015, all United Nations Member States pledged to end extreme poverty and achieve sustainable development by 2030, with Sustainable Development Goal 6 (SDG 6) aiming to provide everyone with sustainable and safe WASH. Yet the pace of progress in ensuring universal access to these basic services remains remarkably slow, impeding people's fundamental human rights.

During this WaterAid strategy period, WASH has the potential to drive significant change in Nepal. The Government's commitment to SDG 6 with clear targets; the promulgation of the WASH Act in 2022 further institutionalising the rights to water and sanitation enshrined in the 2015 Constitution of Nepal; the drafting of the 16th National Plan and the National Health Policy 2019 promoting the integration of promotive, preventive, curative and rehabilitative services – all these offer opportunities to influence change for wider impact and demonstrate cutting-edge interventions to accelerate progress towards Nepal's SDG 6 targets.

Although notable progress was made in Nepal in the past 10 years, with access to basic water supply reaching more than 95% of people¹ and the country being declared open defecation free (ODF) in 2019, thousands of people in Nepal still die each year because of preventable diarrhoeal diseases, often related to WASH. In 2020/21, the incidence of diarrhoea in children under five was 339 per 1,000 over a two-week recall period.² This also contributes to malnutrition, which has resulted in stunting and wasting in 25% and 8% of children respectively, and 19% of children are underweight.³

● School girls showing their clean hands after washing.
Lahan Municipality, July 2022.

Furthermore, the global COVID-19 pandemic brought unprecedented disruption and profound loss of human life all over the world, the aftermath of which continues to affect human life, societies and economies. As a first line of defence, handwashing with soap and water was one of the key hygiene behaviours to reduce transmission of COVID-19. It has always been a vital daily requirement for people to live healthy and dignified lives, together with drinking safe water and using decent toilets.

Climate-related disasters regularly disrupt people's access to WASH services. In 2021, for instance, heavy rains, floods and landslides caused incredible damage, with the headworks of the US\$800 million project at Melamchi delivering water to Kathmandu buried under 10m of rocks and mud, making national news.⁴

The economic cost of ill health and the lost time and opportunities caused by a lack of access to basic needs like water is estimated to be US\$34 billion in the Indian subcontinent.⁵ Yet, in recent years, Nepal has seen people's access to safely managed water slipping from 25% in 2015 to 18% in 2020.⁶ Despite Nepal's ODF status, just 48% of people have access to safely managed sanitation and the pollution of water bodies is widespread – 75% of the population are using water sources contaminated with *E. coli*. Just 62% of people have access to basic hygiene facilities at home.⁶ In healthcare facilities, only 89% have improved and usable sanitation facilities⁷ and no data is currently available on whether these meet the full JMP criteria for basic access (ie with at least one toilet dedicated for staff, at least one sex-separated toilet with menstrual hygiene facilities, and at least one toilet accessible for people with limited mobility).

In the absence of concrete and urgent actions to address the WASH crisis, it will become more challenging to secure people's resilience against future pandemics and the perils of climate change in an increasingly vulnerable world. WaterAid's 10-year (2022–32) global strategy *Ending the water, sanitation and hygiene crisis together – for everyone, everywhere*⁸ commits to accelerating progress towards SDG 6 in the countries where we work by driving and demonstrating models for universal access to WASH, increasing efforts to unlock WASH financing, addressing the climate challenges to WASH, and prioritising WASH in public health.

WaterAid Nepal will address the barriers to WASH in Nepal by focusing on two strategic aims contributing to Nepal's national priorities and WaterAid's global ambition. The first aim is to demonstrate universal access to WASH in select subnational areas to establish resilient, inclusive services that will influence wider change. The other aim is to prioritise gender responsive WASH in the health sector for improved public health. These aims will incorporate the challenges of building resilience to climate change and addressing the financing gaps in the subsequent programme responses. By focusing on these strategic aims, WaterAid is committed to make meaningful contributions towards ending the WASH crisis in Nepal.

● Technical experts from Anglian Water supporting installation of an electro-magnetic flowmeter. Lahan Municipality.



The situation

Nepal is home to nearly 30 million people⁹ from 125 ethnicities and features diverse cultures. Topographically it is divided into three distinct ecological regions – the Mountains, ranging in altitude from around 4,800m to 8,849m above sea level, the Hills, and the Terai (or plains).

Although the Human Development Index (HDI) value of the country increased from 0.399 to 0.602 between 1990 and 2021,¹⁰ incidences of poverty and marginalisation remain high among the Dalit community (who constitute 13.6% of the population)¹¹ plus many ethnic and indigeneous groups. 17.4% of the population are multidimensionally poor,¹² with years of schooling and nutritional deprivations contributing most to ongoing multidimensional poverty. Nepal is ranked as the 10th most vulnerable country to climate change.¹³

The 2015 Constitution is a major milestone for Nepal, recognising water, sanitation and health as fundamental human rights (article 35).¹⁴ The Constitution introduced a federal system of governance, creating one federal, seven provincial and 753 local governments, with delegation of power and authority to the three tiers of government. Local governments play a vital role to ensure people's rights to water and sanitation are promoted, protected and fulfilled, working in cooperation and collaboration with the province and federal states.

The federal NWASH (national WASH database) system¹⁵ supports local governments in evidence-based WASH planning and many of them have started preparing comprehensive WASH plans. However, there is inadequate capacity – resources, people, systems, processes – to collect data; review, implement and monitor WASH plans; and set-up effective regulatory and accountability mechanisms at the local level.

There is mandatory constitutional provision for the representation of women and marginalised groups in governance structures. Women made up 41% of elected legislators in the local government elections in 2017 and 2022. However, patriarchal norms continue to define stereotypical roles between men and women, hindering real progress. According to the Nepal Labour Force Survey 2017–2018, for every 100 males in the working-age population, there are 125 females, but for every 100 employed males, there are only 59 employed females.¹⁶

The Central Bureau of Statistics Report (2019) states that the mean monthly wage income of female employees is 29% less than that of their male counterparts on average, even if the level of education among both genders is the same.¹⁷ There is minimal engagement of women in WASH professions and nominal representation in leadership roles at all tiers.

Rita Kumari Chaudhary disposing medical waste in colour-coded bins at Aadharbhut Health Post, Gulariya Municipality, Bardiya.



The 15th National Plan 2019–24 sets out to graduate Nepal to a middle income country by 2026. The plan aligns with SDG 6.1 and 6.2 targets for the achievement of universal and equitable access to safe and affordable drinking water, sanitation and hygiene for all with an eight-point strategy for progressive WASH services that includes ‘one house, one tap’. While SDG targets for WASH have been set at the federal level, these are yet to be embedded in local and provincial priorities and plans. The government carried out a midterm evaluation of the 15th plan in December 2022, noting that WASH activities and hygiene behaviour change should be reinforced for improved nutrition gains.

With exponential growth in the use of mobile phones,¹⁸ social media has become an important platform for political and social debate with increasing access and popularity of digital technology. Recent examples related to WASH are menstrual hygiene and the response to COVID-19; in both cases, social media helped amplify and create space for discourse, shaping public opinion and promoting behaviour change.

The state of WASH

The major sources of drinking water in Nepal are primarily groundwater in the Terai, Hills and Mountains (with a reliance on dispersed small spring sources in the Hills), and perennial river water in the Mountains. The discourse, policies and actions on water resource management remain fragmented, failing to adequately address the multiple-use, protection, management and conservation of water resources.

The quality of drinking water in Nepal is alarming, with 82% of the population (about **24 million** people) living without safely managed water.¹⁹ Poor sustainability of services is a persisting challenge in Nepal. For example, only 25% of water supply schemes are functioning well, 36% need minor repairs, and 39% need major repairs, rehabilitation or reconstruction.²⁰



■ The members of the Children's Club washing their hands after waste management. Lahan. July 2022.

The National Census data 2021 shows that 4.5% of the population (**1.3 million** people) still practice open defecation.⁹ Recent JMP reports show that only 2% of wastewater is currently treated²¹ and that 38% of the population (**11 million** people) are living without access to a handwashing facility with soap and water at home.⁶

WASH access national and provinces

Indicator and definition	National	Provinces						
		Koshi	Madhesh	Bagmati	Gandaki	Lumbini	Karnali	Sudur Paschhim
Water								
Safely managed drinking water services Percentage of population drinking water from an improved water source that is accessible on premises, available when needed and free from faecal and priority chemical contamination	19	35	25	15	11	15	4	15
Basic drinking water services Percentage of population drinking water from an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing	95	97	98	97	97	98	94	95
Sanitation								
Safely managed sanitation services Percentage of population using improved sanitation facilities that are not shared with other households and where excreta are safely disposed of in situ or removed and treated offsite	61	69	66	37	67	69	85	84
Basic sanitation services Percentage of population using improved sanitation facilities, which are not shared with other households	79	86	73	70	83	83	86	85
Hygiene								
Basic hygiene services Percentage of households with a handwashing facility where water and soap are present	81	85	79	88	88	85	55	58

Access to basic WASH facilities for menstrual health and hygiene (MHH) is critical for women's health, safety and dignity. Most women and girls (94% of those aged 15 to 49) use menstrual hygiene materials and 87% report having a private space to wash and change at home. However, despite increased access to services, over two-thirds of women said they did not participate in social activities (excluding religious visits), school or work during menstruation¹, presumably because of social and cultural beliefs, taboos and lack of facilities outside the home. Most WASH facilities, if and when available, in public places, schools and health facilities are not female friendly. Adolescent girls continue to miss school during menstruation due to inadequate WASH facilities. Students in schools with improved WASH services are more likely to be regular in attendance (80%) compared with those with unimproved facilities or without any (58%).²²

Every year, incidences of WASH-related health outbreaks are reported but critical gaps remain to ensure quality health services for people who are economically poor, socially marginalised, and vulnerable. Although 94% of healthcare facilities⁷ have an improved water source, 89% have improved and usable sanitation services, and 97% have hand hygiene at point of care, no data is currently available on whether these meet the JMP definitions for basic access in healthcare facilities (for example, water should be available on premises) and not all may be fully functional.

Opportunities and challenges

The Nepal Government's recognition of health, water and sanitation as fundamental rights in the 2015 Constitution means it is obliged to deliver quality water and sanitation and ensure quality healthcare for all, putting in place adequate policy and implementation frameworks. Climate change is already having an adverse impact on WASH access and this can be expected to increase, widening inequalities. To effectively implement improvements to WASH through the new federal structure, it is critical that the required policies, strategies, plans and budgeted programmes are developed and implemented across the different tiers of government and sectoral agencies.

The Water and Sanitation Act 2079 (2022), National Health Policy 2076 (2019), and subsequent policies and regulations help institutionalise WASH. Likewise, Nepal's 15th five-year plan and the global SDG targets recognise the need for progress on WASH, including sustainable and efficient use of water. Nepal is in the process of developing its 16th five-year plan which provides a good opportunity to strengthen systems at all tiers of government, especially at the local level, to deliver WASH in the federal context.

● Sitli Devi Ram, filling up a bucket of water at the municipal tap stand outside her home, Gorchhari, Ward 2 Lahan Municipality, Siraha.



● Chet Bahadur Budathoki,
caretaker of Jogidanda drinking
water supply scheme ward 4,
Sailung Rural Municipality,
Dolakha checking water revenue
meter.



WaterAid/Srijana Bhatta

While the Government's plans on SDG goals and targets show a high level of commitment, WASH financing falls drastically short, with significant financing gapsⁱ and government spending against allocated budget remaining at around 60%.²³ This, combined with a significant decline in dedicated WASH funding and the absence of earnest collaborative efforts of all actors, raises the prospect of the SDG 6 targets being missed by considerable margins.

The second cycle of elections completed in 2022 at all tiers of government is an opportunity to renew momentum on WASH systems strengthening. However, the lack of a coherent approach to WASH planning, financing, implementation, monitoring and coordination among the three levels of government poses significant barriers.

WASH is a prerequisite to health, and contributes to people's productivity, school attendance and dignity. A growing recognition of hygiene in federal WASH sector programmes is an opportunity, but there are no comprehensive and resourced strategies promoting hygiene behaviour change. WASH is generally neglected by the health sector, and needs to be inter-linked more systematically at all levels.

Responding to gender equality and social inclusion (GESI) is necessary to ensure everyone, everywhere benefits from quality WASH services. However, WASH decision making largely tends to ignore GESI, despite it being protected in the Constitution as well as in international treaties and conventions.

As we enter a new strategy phase, with universal access to WASH and WASH in public health as core areas of work, we will address key barriers with a comprehensive approach to safe and sustainable WASH, leveraging global, national and local opportunities to accelerate WASH progress.

i. Nepal's Sector Development Plan (SDP) estimated a US\$12.56 billion budget for the period 2016 to 2030 to meet national targets for the WASH SDG by 2030, but the allocation is US\$2.38 billion (19%) and the estimated expenditure is only US\$1.13 billion (9%) by 2022/23.

Our role

In the country strategy period 2017–21, WaterAid Nepal reached 119,000 people with access to drinking water, 81,000 people with access to sanitation, and 875,000 people with access to handwashing facilities with soap and water. We have played a leading role in generating evidence, building capacity, modelling innovations, and influencing policy and practice in the WASH sector.

We aspire to add greater value to the sector in ensuring people's rights to water, sanitation and hygiene are promoted, protected and fulfilled by building on our strengths and learning from our experiences.

Change agent

WaterAid Nepal will be a change agent, driving impactful and unique partnerships to accelerate progress towards the 2030 targets and influencing wider change. This will build on the learning from projects like the Beacon Project, Sustainable WASH, and Prabalya, where significant progress has been made through partnerships with municipal and federal government institutions, local organisations, and WaterAid's water industry partners.

Advocate of GESI WASH

WaterAid Nepal has demonstrated its expertise in a human rights approach to water and sanitation. In this strategy period, we will deepen our expertise in and commitment to WASH rights and be a credible advocate for GESI WASH.

Technical support hub

WaterAid Nepal will be a technical support hub for strengthening WASH systems at the subnational level. The unique collaboration between local governments in Nepal with the water industry in the UK and a public utility in Sweden demonstrates models that strengthen and enhance the capabilities of utility operators and increase people's access to services.

As a dedicated WASH organisation, WaterAid Nepal is in a pivotal position to influence, deliver and build capacity to contribute to the WASH systems strengthening in Nepal.

Knowledge partner

Along with civil society, WaterAid Nepal has played a crucial role in generating local evidence and global learning on WASH rights and related policies, including stakeholder consultations to inform the Water and Sanitation Act (September 2022); the WASH in Schools Operational Procedure with menstrual hygiene criteria (March 2018); and the National Standards on WASH in Health Care Facilities (2021). The hygiene promotion in routine immunisation project, piloted with technical support from WaterAid, was scaled up nationwide by the Government. We have provided analysis on WASH financing since 2017/18, which is referred to widely in the sector. Such engagements establish WaterAid Nepal as a credible research, learning and knowledge partner.

Innovation champion

WaterAid Nepal will continue to foster and enable innovative WASH solutions. We have introduced locally responsive innovations in WASH, such as contactless handwashing stations in response to COVID-19, later replicated by organisations including the UN and bilateral agencies. We have leveraged nature-based solutions for water security, such as groundwater recharge in the Kathmandu Valley and resilient water supply in Dolakha and Kavrepalanchowk districts. We have fostered innovative partnerships with the private sector in the Beacon Project, and run campaigns such as #periodpower on menstruation, engaging the media, influencers and the private sector.

Our aims

Universal access to WASH

Strategic aim

Selected municipalities make significant progress towards universal access to safe and sustainable WASH to influence wider change.

Why?

We believe driving change at the local level is crucial for the sustainable delivery of resilient and safe WASH services. Recognising access to quality drinking water and sanitation as fundamental rights of all citizens, all tiers of government have a shared responsibility to deliver WASH services. However, key barriers pose significant roadblocks in achieving people's constitutional rights and the SDG 6 targets.

We intend to demonstrate municipal-wide universal access in Lahan municipality (Madhesh province), where the WASH situation is worse than the national figures. Around 25% of the population has access to a piped water supply.

The quality of drinking water is poor; only 8.4% has safely managed sanitation,ⁱⁱ and 16.6% do not have a toilet in their house despite the ODF status of the municipality. Institutions, including schools and healthcare facilities, mostly have limited services.

With the Beacon Project, we have already put in place some foundations for sustainable WASH services, by providing technical support mainly to the Lahan branch of the public utility partner (Nepal Water Supply Corporation, NWSC) and supporting Lahan municipality to establish a WASH unit and develop its WASH plan.

● **Ram Narayan Chaudhary, 53,** employee of the Nepal Water Supply Corporation, standing in front of a large water tower, arms folded, holding a wrench, Lahan, Siraha. September 2019.

ii. Lahan WASH Plan, which is about to be finalised. The Plan was prepared by Lahan municipality with support from WaterAid Nepal.



WaterAid/Mani Karmacharya

● Photograph taken for the Beacon Project. Community toilet in Dinabhadri, Ward 2, Lahan. February 2020



WaterAid/Mani Karmacharya

Demonstrating a comprehensive model of a universal WASH system in at least one selected subnational area will provide the sector with learning and evidence to inform relevant national WASH policies, plans and actions, influencing wider change. Universal access to WASH rights is also vital to reach the poorest and most marginalised people, including women and girls.

Barriers to change

- Inadequate regulation and accountability mechanisms for the execution of roles by institutions responsible for delivery.
- Lack of adequate political prioritisation and investments (financial and human resources) for WASH.
- Limited management and delivery models, poor capacity of service providers, and inadequate local supply chains, leading to substandard services.
- Marginalised people, including women and girls, side-lined and unaware of their WASH rights, resulting in a lack of active engagement in WASH.
- Social and cultural beliefs are responsible for taboos, discrimination and stigma related to WASH, hindering access, and especially putting a higher burden on women and girls.

Drivers of change

- Strong and responsive government/public institutions with effective policies, plans, coordination and accountability mechanisms for WASH delivery.
- Political willingness and leadership to prioritise WASH, unlocking financing and ensuring adequate resourcing at all levels, supported by a cohesive sector.
- Strategic partnerships of public, private and non-government actors to demonstrate resilient delivery and management models at subnational levels, backed by adequate resources (financial, human, technological, supply chain).
- Aware and engaged communities taking action on WASH rights to improve access to and sustainable management of WASH services.
- Behaviour change to motivate hygiene behaviours, use and management of safe sanitation and safe water, for sustainable WASH.

How?

The Universal Access to WASH programme draws lessons from WaterAid Nepal's municipal-wide inclusive WASH Beacon Project²⁴ in Lahan municipality, the Sustainable WASH (SuWASH) programme in two rural municipalities in Karnali province, and our policy work on the rights to water and sanitation, WASH plans, financing analysis and research.

We will:

- Work with government, WASH providers, institutions, user committees and sector actors to strengthen WASH policies, planning and accountability mechanisms that increase access to safe, sustainable and resilient WASH services, with due consideration to crossover with health, climate and other related areas.
- Foster and strengthen strategic partnerships with the public sector, private sector, non-governmental organisations, civil society, and user groups to demonstrate innovative WASH management and resilient delivery models that influence wider change.
- Advocate WASH prioritisation and financing, backed by research and evidence.
- Invest in research and innovation to drive behaviour change for safely managed WASH.
- Facilitate the engagement of communities so they are aware of their WASH rights and responsibilities to actively contribute to decision making and the management of WASH services, with the rights and needs of marginalised people, women and girls at the forefront of all our efforts.
- Actively seek to replicate success and effect wider change in other identified local/subnational areas where there is ambition for universal access, supported by strong leadership.

iii. Anglian Water is a UK water company. It partners with a range of leading construction and technology companies in six strategic alliances. Each of the six alliances draws specialist partners together to deliver a specific element of Anglian Water's investment programme, from large construction projects, to rolling programmes such as meter replacements. These are collectively referred to as the Anglian Water Alliances and all the companies involved contribute towards the Beacon Project.

WaterAid Nepal will build on the Beacon Project to intensify the work in Lahan municipality, to work towards universal access to WASH in communities, institutions (for example, education and health) and public places to influence wider change in collaboration with partners such as the public utility NWSC, Lahan municipality and Anglian Water Alliances.ⁱⁱⁱ We will provide support to enhance the quality of WASH services, contribute to strengthening institutional arrangements, and build sector capacity for resilient WASH services with the technical and knowledge partnership with Anglian Water Alliances through their philanthropic support.

Lahan is one of the 23 towns where NWSC is providing a piped water supply service. We aim to maximise the impact from the work in Lahan municipality to demonstrate universal access to WASH to other similar towns and municipalities throughout the country and inform provincial/federal policies and strategies. We will be replicating some of the learning from the Beacon Project in Godawari Municipality through the EU-funded Water Operator Partnership there.

Outcomes:

- Functional institutions for resilient WASH service delivery at local level, with adequate policies, regulations, plans, monitoring and coordination.
- Adequate financing for WASH with high prioritisation by government, donors, private and non-government sectors, addressing issues faced by women, girls and marginalised communities.
- Effective management and delivery models for resilient WASH services, demonstrated by capable and responsive operators/service providers.
- Empowered people taking action on inclusive WASH rights and good hygiene practice.
- Best practices demonstrated are scaled up and replicated in similar contexts by sector actors (public, non-government, private sectors).

■ Swala Kumari Singh, Female Community Health Volunteer conducting the hygiene session at Dhime Health Post, Jajarkot.



WaterAid/Mani Karmacharya

WASH and public health

Strategic aim

Gender-responsive WASH is prioritised for improved public health.

Why?

Health, water and sanitation are fundamental human rights in the Constitution, providing a breakthrough opportunity to integrate WASH and health to accelerate progress towards achieving national WASH and health targets. WASH-related diseases are among the top 10 most prevalent diseases in the country. Diarrhoeal deaths in Nepal reached 6,071 in 2020.²⁵ Every year, sporadic outbreaks of cholera, an acute diarrheal illness caused by contaminated food or water, are also reported. Different types of malnutrition, such as stunting, wasting and being underweight, are prevalent in children. Investments in WASH have the potential to reduce the disease burden by strengthening frontline defences to prevent and control infections, as demonstrated during the COVID-19 pandemic.

Integrating WASH and health is vital for contributing to gender equality, as women and girls are most impacted by a lack of services due to their specific WASH needs and significant roles as carers in the family and within the health workforce. Poor management of menstrual health and hygiene has a negative impact on adolescent girls and women. A national survey conducted in 2019 found that 27% of girls had missed school over the past 12 months due to menstrual cramps, heavy bleeding, and fear of leakage.²⁶ Gender-responsive WASH services in communities, schools and healthcare facilities, delivered at scale through effective integration and enhanced women's leadership, can significantly reduce these challenges.

Barriers to change	Drivers of change
<ul style="list-style-type: none"> ● Lack of political will to prioritise and invest in preventive care and measures. ● Besides immunisation, a lack of sufficient prioritisation of hygiene in relevant programmes, with WASH overlooked in inter-sectoral planning and budgeting. ● Ineffective coordination and collaboration between sectoral ministries, departments and units. ● Limited skills and capacity in the sector to design and deliver inclusive creative hygiene behaviour change programmes. ● Social and cultural beliefs are responsible for taboos, discrimination and stigma hindering access to services, and especially putting a higher burden on women and girls. 	<ul style="list-style-type: none"> ● Generating and disseminating credible evidence of linkages between WASH and public health necessary for achieving sector priorities. ● Translating guidelines (for example, WASH in Healthcare Facilities Standards) and relevant policies and plans into practice, through dissemination, technical support and demonstration. ● Programmes integrating hygiene behaviour change and WASH to strengthen health systems, with adequate resources and capacity to deliver. ● Public awareness of the importance of WASH and public health through advocacy, campaigns and communication.
<p>How?</p> <p>WaterAid Nepal’s concrete experiences and learning of integrating hygiene behaviour change into routine immunisation and modelling WASH in primary healthcare facilities and schools informs the WASH and public health programme response. We will focus on the nexus of WASH, health, hygiene, nutrition and gender. Innovations in the integration of hygiene behaviour change have been demonstrated at scale in Nepal, with the integration of hygiene promotion in the Government’s routine immunisation for children and COVID-19 vaccination programmes.</p> <p>We will further assess key entry points for WASH in public health programmes for new-born, child, adolescent and maternal health, and explore engagement with associations and networks of nurses, health workers and public health institutions. We will promote the integration of WASH in health through evidence-based research, policy dialogues and technical support, to design and implement impactful WASH and public health programmes. We will continue to work with influencers to promote the impact of hygiene behaviour change.</p>	<p>Outcomes</p> <ul style="list-style-type: none"> ● Hygiene behaviour change (HBC) in routine immunisation is sustained, with the resources and capacity to deliver at all levels, and HBC is comprehensively integrated into other relevant public health programmes. ● Inclusive WASH in healthcare facilities contribute to the delivery of sustainable quality health services that are responsive to the needs of women and girls. ● A comprehensive and holistic approach to menstrual health and hygiene is adopted across sectors, with adequate policies, programmes and resources. ● The health sector has targets and budget for financing the integration of WASH, in coordination and cooperation with the relevant sectors.

Our approach

We advanced our understanding and application of a human rights-based approach to WASH in the previous strategy period, successfully demonstrated the integration of hygiene behaviour change through the hygiene promotion in routine immunisation programme; and demonstrated innovative partnerships such as the Beacon Project in Lahan to strengthen local WASH delivery.

Using these as a springboard, we will adopt a systems strengthening approach guided by the principles of human rights (the rights to health, water and sanitation, as enshrined in the Constitution) to **deliver critical services, build capacity and influence wider change**. We will intensify work at the subnational level for universal WASH; generate sound evidence and learning to contribute to wider sector policies and regulations; and enable communities, user committees and local organisations to play an active role in WASH. Programme interventions will adhere to the Do-No-Harm principles and enhance the capacity of both right-holders and duty-bearers to ensure the functionality of WASH facilities and sustainability of services.

We will advance **gender equality, and social inclusion (GESI)** across all our work. We will build the capacity of both rights-holders and duty-bearers in GESI by promoting and amplifying leadership and decision making by women, girls and marginalised people. We will continue to champion menstrual health and hygiene in the sector. We will identify and address barriers to WASH resulting from harmful social, cultural and gender norms in our programme responses.

Partnerships and alliances are essential to realising high-quality, effective and sustainable programmes. We will collaborate with local and international organisations, water industry partners, development partners, the media, influencers, and the government to create momentum and actions to accelerate progress

towards SDG 6. We will foster and strengthen partnerships with the private sector for sustainability and promoting self-reliance, and with academic institutions for research and innovation.

We will identify locally responsive solutions informed by global best practices. There will be integration of appropriate **evidence, learning and innovation** in each project. In this strategy period, we will continue to explore and develop integration between WASH and other sectors, such as nutrition, agriculture, climate change and livelihoods, to maximise our impact.

● **Jyoti Khada, 23, Member, Water Safety Plan, filling the gagri (water container) at her tapstand, Kalinchowk Rural Municipality-5, Dolakha, June 2022.**



Resourcing the strategy

The implementation of the strategy will be supported by detailed programme plans for the two aims and the country programme resourcing plan for people, finances, funding and communications.

We will continue to ensure WaterAid Nepal is a safe and wholesome place to work, keeping wellness, psychological safety and safeguarding as top priorities and promoting high quality work, mutual respect and collective team leadership. We will deepen our understanding of power, and gender to support the delivery of our strategy with meaningful actions, both externally and internally.

We will monitor and track progress of the strategy supported by a high-level results framework with measurable indicators, aligning to the global WaterAid Monitoring and Evaluation policy and procedures. We will proactively share lessons from our work as an accountable and learning organisation to inform wider sector discourse and actions.

● Hygiene session for children through creative games. Kalebhum Secondary school in Shailung Rural municipality. September 2022.



WaterAid/Srijana Bhatta

References

1. UNICEF/Central Bureau of Statistics (2020). *Multiple Indicator Cluster Survey final report 2019: Monitoring the Situation of Children and Women in Nepal*. Available at: <https://www.unicef.org/nepal/reports/multiple-indicator-cluster-survey-final-report-2019> (accessed December 2022).
2. Government of Nepal, Ministry of Health and Population (2022). *Department of Health Services Annual Report 2077/78*. Available at: https://dohs.gov.np/wp-content/uploads/2022/07/DoHS-Annual-Report-FY-2077-78-date-5-July-2022-2022_FINAL.pdf (accessed December 2022).
3. Government of Nepal, Ministry of Health and Population (2022). *Nepal Demographic and Health Survey 2022: Key indicators report*. Available at: <https://dhsprogram.com/pubs/pdf/PR142/PR142.pdf> (accessed April 2023).
4. The World Bank (2022). *In Nepal, 2 major climate disasters in a single year highlight the need to build resilience*. Available at: www.worldbank.org/en/news/feature/2022/03/28/in-nepal-2-major-climate-disasters-in-a-single-year-highlight-the-need-to-build-resilience (accessed March 2023).
5. Nepal News, Sharma H (2022). *The state of water supply in Nepal: what are the better initiatives to improve water supply in rural parts of the country?* Available at: <https://nepalnews.com/s/issues/the-state-of-water-supply-in-nepal> (accessed March 2023).
6. WHO/ UNICEF (2020). JMP data. Available at: <https://washdata.org/> (accessed December 2022).
7. WHO/ UNICEF (2022) *Progress on WASH in health care facilities 2000–2021: special focus on WASH and infection prevention and control (IPC)*. Available at: <https://cdn.who.int/media/docs/default-source/wash-documents/wash-in-hcf/jmp-2022-wash-hcf-launch-optimized.pdf> (accessed March 2023).
8. WaterAid (2022). *Our Global Strategy 2022-2032*. Available at: <https://www.wateraid.org/uk/our-global-strategy> (accessed March 2023).
9. Government of Nepal, Central Bureau of Statistics (2023). *Final Report of National Population Census 2021*. Available at: <https://censusnepal.cbs.gov.np/results/population> (accessed March 2023).
10. UNDP (2022). *Nepal moves up one place in human development, ranks 143rd*. Available at: <https://www.undp.org/nepal/press-releases/nepal-moves-one-place-human-development-ranks-143rd> (accessed December 2022).
11. Government of Nepal, National Planning Commission Secretariat, Central Bureau of Statistics (2012). *National Population and Housing Census 2011, (National Report), Volume 01*. Available at: <https://unstats.un.org/unsd/demographic-social/census/documents/Nepal/Nepal-Census-2011-Vol1.pdf> (accessed November 2022).
12. Government of Nepal/UNDP/UNICEF (2021). *Nepal Multidimensional Poverty Index: Analysis Towards Action*. Available at: <https://www.unicef.org/nepal/reports/nepal-multidimensional-poverty-index-2021-report> (accessed December 2022).
13. GermanWatch (2021). *Global Climate Risk Index 2021: Who suffers most from extreme weather events? Weather-related loss events in 2019 and 2000-2019*. Available at: <https://www.germanwatch.org/en/19777> (accessed December 2022).
14. Government of Nepal (2015). *Constitution of Nepal*. Available at: <https://lawcommission.gov.np/en/wp-content/uploads/2021/01/Constitution-of-Nepal.pdf> (accessed December 2022).
15. Government of Nepal, Ministry of Water Supply. *NWASH dashboard*. Available at: <https://nwash2.softwel.com.np> (accessed March 2023).
16. The Kathmandu Post, Shrestha PM (2019). *Only 22 percent of working-age women are employed in Nepal*. Available at: <https://kathmandupost.com/valley/2019/05/02/only-22-percent-of-working-age-women-are-employed-in-nepal> <https://kathmandupost.com/valley/2019/05/02/only-22-percent-of-working-age-women-are-employed-in-nepal> (accessed March 2023).
17. The Himalayan Times, Dhungana S (2019). *CBS report brings to fore huge gender pay gap*. Available at: <https://kathmandupost.com/valley/2019/20/05/CBS> (accessed March 2023).
18. Nepal Telecommunications Corporation, *Annual Report 2020-21*, Page 7.
19. Government of Nepal, National Planning Commission (2020). *Nepal Sustainable Development Goals: progress assessment report 2016-19*. Available at: <https://nepal.un.org/sites/default/files/2021-02/UNDP-NP-SDG-Progress-Report.pdf> (accessed March 2023).
20. Government of Nepal (2016). *Nepal water supply, sanitation and hygiene sector development plan (2015-30)*.
21. WHO/ UNICEF (2022) JMP 2022.
22. Sharma MK and Adhikari R (2022). *Effects of Water, Sanitation, and Hygiene on the School Absenteeism of Basic Level Students in the Government School of Nepal*. Available at: <https://www.frontiersin.org/articles/10.3389/educ.2022.869933/full> (accessed April 2023).
23. WaterAid (2021). *WASH Financing in Nepal 2020/21. Context: WASH SDGs and COVID 19*. Available at: <https://washmatters.wateraid.org/sites/g/files/jkxoof256/files/financing-factsheet-for-wash-in-nepal-2020-21.pdf> (accessed March 2023).
24. WaterAid (2021). *Beacon Project: lessons from a partnership to provide sustainable, equitable and universal WASH in Lahan, Nepal*. Available at: <https://washmatters.wateraid.org/publications/beacon-project-lessons-partnership-sustainable-wash-nepal> (accessed March 2023).
25. World Life Expectancy (2020). *Nepal Diarrhoeal Diseases*. Available at <https://www.worldlifeexpectancy.com/nepal-diarrhoeal-diseases> (accessed December 2022).
26. Dhimal M, Silwal S, Parajuli K, et al (2020). *Status of menstrual health and hygiene management among adolescent girls of Nepal*. Nepal Health Research Council and World Vision International. Nepal. Available at: www.wvi.org/publications/report/nepal/status-menstrual-health-and-hygiene-management-among-adolescent-girls.

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everywhere within a generation. Only by
tackling these three essentials in ways that last
can people change their lives for good.**

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