**INCREASING HOUSEHOLD ACCESS TO SAFE WATER IN ETHIOPIA**

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**Country:** Ethiopia

**Sector:** Basic Services, Water

Ethiopia like many other countries in Sub-Saharan Africa has low levels of water, sanitation and hygiene (WaSH) facilities and practices. The national coverage figures for access to safe rural water supply within 1.5km are quoted to be 41% and access to safe urban water supply within 0.5 km to be 78%. Sanitation coverage is quoted to be 18% in rural areas and 57% in urban areas. In the rural areas long queues around safe drinking water points are not uncommon.

To respond to the big WaSH access challenge, the government of Ethiopia (GoE) launched an ambitious universal access plan (UAP) in mid 2005 to enable the country achieve 100% access to safe and sustainable WaSH by the year 2012. All Woredas were required to generate baseline data and implement programs to achieve the UAP targets.

Six Woredas in the Southern Nations, Nationalities and Peoples Region (SNNPR), requested SNV Ethiopia Southern Portfolio for capacity support to assist them generate WaSH baseline data and develop strategic plans to achieve the UAP. Other key WaSH partners in the region namely the Water Resources Development Bureau (WRDB) and UNICEF were also interested in baseline data to enable them develop strategies for assisting the Woredas achieve the UAP. The demand for fresh baseline data was also prompted by the unreliability of the existing baseline data in SNNPR quoting unrealistic figures of access to safe water to be over 75% in some Woredas and access to latrines in the Region to be over 90%. The quest for the baseline by 6 Woredas provided an excellent opportunity for SNV to establish benchmark data required at the initiation of capacity support to the 6 Woredas. SNV seized the opportunity and readily agreed to support the 6 Woredas undertake the baseline survey assignment.

In the baseline survey assignment SNV played the following multiple roles:

1. Brought UNICEF, WRDB and Woredas together to jointly undertake the baseline study.
2. Assisted stakeholders to develop a baseline survey framework that was more focused on generating information from both the WaSH users and service providers perspectives. This was a radical departure from the previous baseline surveys which focused more on technical data generated by GoE technical staff. To capture the views of both the service providers and users, the following measures were employed: (1) Interviews, observations and group discussions were undertaken at the district, household, water scheme levels and also in schools, health institutions and markets, (2) Kebele and Woreda level stakeholder assemblies were held to ratify the baseline results and (3) Discussions over the validity of the data were held with Woreda and Regional technical staff, Regional bureau heads and non state actors (NGOs and Faith based organisations) working in the 6 Woredas.
3. Lobbied for inclusion and assessment of governance for empowerment (GFE) aspects in the baseline survey. This assisted to generate reasons for the Wash access status.
4. Identified and covered costs of 5 local capacity builders (LCBs) to partner in the implementation of the baseline survey. The LCBs were quasi private sector organisations set up by GoE in collaboration with the World Bank to strengthen the capacity of Woredas to increase access to WaSH. The participation of the LCBs was considered important because they are best placed to upscale and sustain the baseline survey process in other Woredas and in the future.

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1 A Woreda is equivalent to a district.
2 A Kebele is the lowest administrative unit with a population of 800 to 1500 households.
5. Monitored and provided technical advice to the institutions that implemented the survey namely; the LCBs, Woreda WaSH teams (WWT) consisting of the district Water, Health, Education and Finance sector staff, and Kebele baseline survey teams (KBSTs). 50 Households, all markets, schools, health institutions and water schemes per Kebele were assessed in the survey.

6. Consolidated the baseline preliminary results, sought feedback from actors and created awareness to stakeholders by holding discussion meetings with Woreda level stakeholders, Heads and technical staff of the bureaus and non state (NGOs, Faith based organisations) working in WaSH in the 6 Woredas.

The WaSH baseline data indicating the access and the governance status of WaSH in the 6 Woredas is now in place. The data shows that WaSH access status is lower than what has been always quoted by actors in SNNPRS. Access to safe water and sanitation at household level is less than 50%. Access to sustainable WaSH in schools, health institutions and markets is quite low and requires urgent attention (Fig 1).

Figure 1: WaSH access status in the institutions and at households in the 6 Woredas

![Access to WaSH](image)

Trends in the data also reveal that there is a relationship between access to safe latrines and households family health as indicated by households affected by diarrhoea in 2007 (Fig 3). However, the relationship does not show a perfect fit suggesting that other factors play a role (Fig. 2).

Figure 2. The influence of access to latrines on households affected by Diarrhoea

![Influence of presence of latrines](image)

From analysis and discussions with stakeholders on the governance for empowerment data, the top priority issues that ought to be addressed in order to accelerate access to WaSH are the: (1) low implementation of WaSH policies, (2) limited access and use of finances to expand WaSH coverage in institutions and at households, (3) lack of collaboration and coordination amongst stakeholders, and (4) unsustainable management of WaSH resources and facilities (Table 1.).
<table>
<thead>
<tr>
<th>General GfE criteria</th>
<th>WaSH GfE variable</th>
<th>Status of GfE in the 6 Woredas</th>
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<tbody>
<tr>
<td>Effectiveness and efficiency</td>
<td>Collaboration and coordination among stakeholders</td>
<td>No coordination, collaboration and partnerships amongst non state actors and government WaSH sectors.</td>
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<tr>
<td>Access to and use of finances</td>
<td></td>
<td>No funds in all Woredas to finance UAP and utilisation of limited available funds is not effective.</td>
</tr>
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</table>
| Management of WaSH resources and facilities | | • 31% of water schemes are non functional (range is from 15 to 53% )  
• 59% of schemes cannot cover operation and maintenance costs  
• 66% of the schemes and their catchments are poorly managed  
• Water scheme committees are not well equipped to effectively manage water schemes  
• 52% and 26 % of schools and health institutions respectively, have poorly managed latrines. |
| Rule of law | Legal framework for WaSH committees. | WaSH committees have no legal status and in some schemes they do not exist. |
| | Implementation of WASH policies and regulations | No knowledge, implementation and enforcement of WaSH policies at district and lower levels |
| | Influence of culture and traditions | Traditions do not limit toilet use. Instead, traditions do not condemn open defecation |
| Accountability and transparency | Response of WaSH service providers | It takes 1 month and >3 months to receive services from the Woreda and Regions technical staff, respectively whenever a request is made |
| Participation and responsiveness | Participation of women, the youth and vulnerable groups | 30% participation by women in WaSH development & management  
Women do not hold leadership positions in the committees  
There are no specific considerations for the physically disabled to access WaSH |
| | Participation of the private sector | 10% of schemes are constructed by private sector organisations (PSOs) |
| Equity and inclusiveness | Strategies for ensuring girls and vulnerable children access to WaSH in schools | Only 40% of the schools have strategies for ensuring girls and vulnerable children’s access safe WaSH in schools |
Apart from establishing the WaSH status baseline, the survey assignment in addition resulted in several positive outcomes:

1. In each of the 6 Woredas, the GoE staff and their development partners are engaged in the process of using the data to develop their UAP targeted Woreda level WaSH strategic plans. The WRDB and UNICEF are also using the data to develop their action plans for capacity support to the 6 Woredas.
2. The Woreda WaSH teams from the 6 Woredas and the 5 LCBs who participated in baseline survey are now equipped and capable of carrying out and updating WaSH baseline surveys.
3. Awareness on the GoE’s UAP, and the access and governance status of WaSH in the 6 Woredas has increased amongst stakeholders at all levels.
4. UNICEF, WRDB, SNV are now discussing on how to adequately equip the water scheme committees so that they can be adequately empowered to manage the water schemes effectively.
5. UNICEF and the WRDB bureau have pledged to increase funding to address governance issues in the next financial year starting in July 2008.

The exposure of the low access and governance status of WaSH resulted in a rapid response and action by the WRDB that has created a significant impact. The bureau has rehabilitated a total of 16 water schemes in the months of March and April 2008 and this has enabled approximately 1600 households to access safe drinking water.

1. Incorporation and assessment of the GfE questions in the baseline study at the district, household, institution and water scheme levels was valuable on the following accounts:
   a. It contributed to the rapid response of development actors to act. This response is attributable to fact that results of GfE assessment exposed not only the underlying causes for the low access to WaSH, but also the institutions that were failing to perform. This created disbelief and embarrassment which resulted in an immediate response and action. This response suggests that raising awareness, challenging the status quo, questioning the business as usual syndrome, and confronting actors with hard facts can result in positive actions and results.
   b. It led not only to greater understanding of the causes for the low WaSH status, but also the reasons for some puzzling high figures quoted and capacity gaps at lower levels. For instance it has now been established that:
      i. the transfer of WaSH knowledge and skills from one decentralisation level to another (from the region, to the district and to the water scheme) is in most cases inadequate. In the discussions, most actors felt that this was deliberate in order to create a demand for the staff at a higher level to always go and provide the services at the lower levels. It was quite revealing to listen to the GoE district level staff blame the regional level staff for intentionally not adequately empowering them while the water scheme committees at the lower level blamed the district staff for the same fault.
      ii. the reasons for poor management of the water schemes in not only because of the limited knowledge and skills of the WaSH committees, but also due to lack of spares, WaSH committee’s lack of the legal powers to enforce laws and regulations and inappropriate pumps being fitted to some water schemes.
      iii. The high WaSH access figures quoted for SNNPR which are not traceable on the ground were attributed not only to some service providers reporting unrealistically high results in order to justify their contribution but also to the fact that figures are inflated when data is reported from one level to another (from the Kebele to district to the zone and to the region). The case of Alaba Special Woreda where access to safe water reported at the Woreda is 32% yet the reported data at the Regional level is 69% illustrates the point.
2. In SNNPR, GoE has put in place Health Extension Workers in every Keble and they are a valuable resource for mobilising the community and passing extension messages. However, in the baseline survey, the extension workers were not facilitative and instead they tried to block accurate information on sanitation and health from being known. Apparently they felt threatened because the process exposed the reality that contradicted what they had always reported to the higher levels. This observation suggests that in a community level survey one has to be aware that depending on the local dynamics and expectations, local extension workers and administrators can be gate keepers obstructing exposure of the reality on the ground.

3. For baseline data to be of great value, the timing of when to undertake the baseline study is apparently very important. In the Ethiopian case, the baseline was undertaken at a critical moment during the dry season when both the community and development actors were very concerned and were willing to take action. This timing not only increased commitment but also a desire to take action.

4. In SNNPR, access to safe water cannot be achieved from the perspective of household’s access to drinking water alone. The other uses and in particular livestock have to be taken into consideration.