Flowing Futures

Atlas on Water, Sanitation, Hygiene and Human Rights

We stand with people on the margins,
geographical or social, so they can be at the centre

We World
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Flowing Futures.
Atlas on Water, Sanitation, Hygiene and Human Rights

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Credits
This Atlas is the result of collaborative, choral, and participatory efforts. Such an outcome would not have been achievable without the voices and invaluable assistance of the whole WeWorld staff. We thank the WASH Community of Practice, all focal points, regional and country representatives, our local partners, and project managers from international and domestic programmes.

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FOREWORD

Many injustices are utterly unacceptable in our world – from the pervasive inequalities that unfairly restrict access to fundamental rights, to the stark divisions that segregate individuals into the privileged and the marginalized, into those who have a future and those who don't. Amidst these injustices, is unequal access to water. Despite it being vital for people and the planet to thrive and to meet any essential need, **around 2 billion people still do not have access to clean, safe, and drinking water.**

The causes of these shortcomings are numerous, but they all point to a single, inescapable truth: **water is a limited resource that, for far too long, few have used excessively and recklessly to the detriment of the most vulnerable people.** Although it should not be susceptible to this logic, access to water remains a question of power.

Access to water is crucial to the exercise of other human rights, such as the right to food, education, housing, health, and employment, as well as the right to be free from cruel, inhuman, or degrading treatment. It is also critical to attaining gender equality and eliminating all types of discrimination. Starting from these principles, the right to sanitation and hygiene services has been publicly acknowledged. This includes having physical access to and using secure, high-quality, socially and culturally relevant sanitation and hygiene services that protect one's privacy and dignity in all aspects of life.

The term WASH (Water, Sanitation, and Hygiene) was established in the context of international cooperation to refer to actions implemented to provide coordinated and integrated access to water, sanitation, and hygiene services. Access to and availability of such services is essential for ensuring health, dignity, and development.

What we hope to do with this Atlas is to bring the WASH subject to the wider public's notice because it affects everyone, independent of the context of origin.

WeWorld has always worked tirelessly and steadfastly to ensure adequate and equal access to WASH services for more than 50 years. **The *Flowing Futures* Atlas was designed to connect the dots from four years of implementing WeWorld's WASH Global Strategy 2020-2023, allowing us to retrace our steps, capitalize on lessons learned, and explore new perspectives.** At the same time, we sought to highlight our multisectoral and interdisciplinary approach to WASH, with the ultimate objective of reinforcing how **WASH services are more than simply taps and sanitation; they are catalysts for a brighter, healthier, and more egalitarian future for all.**

In a world that is continuously changing, where obstacles appear insurmountable and discrimination remains, we are proud of standing up to a fundamental truth: **access to clean water, sanitation, and good hygiene is a human right, not a privilege**. As we deepen our commitment to humanitarian aid and development, we recognise the enormous impact that WASH services can have on communities throughout the world.

As this Atlas shows, despite significant progress in recent decades in ensuring access to safe drinking water, sanitation, and hygiene, far too many people continue to be denied these rights. Emerging challenges, such as the COVID-19 pandemic, the escalation of protracted conflicts and the emergence of new war scenarios, the increasingly devastating and frequent effects of climate change, the indiscriminate exploitation of natural resources, and the widening of inequalities – including water privatization - that push more and more people to the margins, are all factors that require us to change the way we look at problems and work to find effective and long-lasting solutions.

WeWorld has developed a multisectoral and interdisciplinary strategy and set of skills to meet old and new challenges and ensure that everyone has universal access to safely managed WASH services. We have been working in very diverse countries throughout the world for more than 50 years to effectively realise Sustainable Development Goal 6 (SDG 6), which seeks to ensure the availability and sustainable management of WASH services, opening to a broader and more holistic perspective. **Thus, two assumptions underpin WeWorld's intervention: the importance of WASH services in all aspects of people's lives and the effective, deliberate, and long-term engagement of communities.** What we are trying to do is to **go beyond the simple, albeit fundamental, creation of infrastructure and to intervene in a more comprehensive, inclusive, and all-encompassing manner.**

As you progress through the pages of our report, we invite you to join us in examining the critical importance of WASH services for everyone. **Water, sanitation, and hygiene are the threads that hold together the fabric of our communal well-being, protecting everyone's dignity and health.** Within these pages, you will find stories of change, of lives impacted by the flow of clean water, the access to adequate sanitation, and the empowerment that comes from practising good hygiene. Yet, alongside these tales of hope, we do not shy away from the stark realities that persist. We present the challenges faced by communities, urging a collective call to action. **But such efforts must constantly bear in mind the active role of communities as the primary change agents.**

As expressed in the final section "Moving Forward. Conclusions and Recommendations", this Atlas does more than just reveal the problems; it also serves as a beacon, pointing us to collective solutions. It is a proclamation that we, as a global community, have the ability to impact change through smart alliances, new ideas, and unyielding commitment.

WeWorld remains committed to advancing the cause of inclusive WASH services, creating a fabric of hope, health, and dignity for future generations. Let us turn the page together and envision a future in which everyone may prosper and fulfil their goals. **A future without discrimination, in which everyone can flow effortlessly like water, unimpeded by barriers of bias, nurturing their potential to flourish and contribute harmoniously to the collective stream of well-being.**

Dina Taddia,
WeWorld CEO

Marco Chiesara,
WeWorld President

EXECUTIVE SUMMARY

For more than 50 years, WeWorld has been standing with people on the margins, geographical or social, so they can be at the centre. We believe in a world where all individuals enjoy the same rights and opportunities, regardless of their background. **Guaranteeing the right to water is one of the cornerstones for protecting human rights and, as a result, ensuring that everyone may thrive. WeWorld has always worked tirelessly and steadfastly to ensure appropriate and equitable access to water and WASH (Water, Sanitation, and Hygiene) services.**

The *Flowing Futures* Atlas was created to draw together the threads of four years of implementation of WeWorld's WASH Strategy, to retrace the steps taken, capitalise on the lessons learned, and explore new perspectives. At the same time, we wanted to describe our multisectoral and interdisciplinary approach to WASH with the ultimate goal to affirm once more how **WASH services are more than just taps and sanitation, but catalysts for a brighter, healthier, and more equitable future for all.**

To systematise our work in the WASH sector, we divided our interventions into 7 thematic insights that effectively encapsulate our multisectoral and interdisciplinary approach (see the graph below). These insights are the result of participatory discussion between different branches of the organisation: our WASH Global Thematic Expert, country representatives, WASH focal points (gathered in the WASH Community of Practice), and the Research Centre.

Each thematic insight is founded on the SDG targets and encompasses multiple related and overlapping topics, establishing a framework that focuses on achieving SDG 6 (Water for All) and, as a consequence, all the other SDGs. Within the framework, the 7 thematic insights are not listed in order of significance but rather revolve around a shared goal.

WEWORLD'S MULTISECTORAL AND INTERDISCIPLINARY APPROACH TO WASH

A READER'S GUIDE TO THE ATLAS

UNDERSTANDING WATER AS A HUMAN RIGHT

Water is vital for people and the planet to thrive and to meet any essential need, but around 2 billion people still do not have access to clean, safe, and drinking water (WHO/UNICEF, 2023). The first chapter focuses on understanding the process that led to the acknowledgement of water as a human right, as well as its staggering interconnectedness with all areas of people's lives.

The chapter delves into the characteristics that water should have in terms of quality, quantity, and accessibility and the minimum standards set at an international level. Guaranteeing these specific conditions of access to water is even more important in emergency contexts (conflicts, epidemics, natural disasters, etc.) **where minimum levels of safe drinking water are essential for the survival of affected populations, who are more likely to contract diseases linked to inadequate sanitation and insufficient or unsafe water supplies** (primarily diarrhoeal and waterborne diseases). Access to drinking water is required for the enjoyment of other human rights, such as the right to food, education, housing, health, and work, as well as the right to be free from cruel, inhuman, or degrading treatment. It is also essential for achieving gender equality and eradicating all discrimination.

Starting from these assumptions, the right to sanitation and hygiene services has been explicitly recognised. **This entails having physical access to and using safe, high-quality, socially and culturally sensitive sanitation and hygiene services that safeguard one's privacy and dignity in all aspects of life.** The fundamental transition from water to WASH (Water, Sanitation, and Hygiene) is then explained in this chapter, reporting data, information, maps, and infographics that allow us to grasp the global scope of this sector. Safe drinking water, sanitation, and hygiene services are essential for ensuring human health and well-being while contributing to the improvement of other aspects of individual and community life, such as livelihood, work, housing, and education for all, on the one hand, and the development of resilient communities and a healthy environment, on the other (WHO, 2023a).

Finally, this section reports the key principles (4 pillars) of WeWorld's WASH Global Strategy 2020–2023, on which the entire analysis contained in this Atlas is based.

THE 7 THEMATIC INSIGHTS

The second chapter represents a sort of legend, a guide to reading this Atlas, focusing on the different aspects, often intersecting with each other, that make up each thematic insight. Continuing with the reading of the Atlas, each thematic insight is explored in depth, reporting data from accredited sources and WeWorld's field operations, examples of good practices, and standardised working modalities that WeWorld has developed over the years to guarantee continuity, method, and sustainability of the interventions, always keeping in mind the need to adopt a context-specific approach. Each thematic insight is then presented again within the Atlas, specifically within the country factsheets in which WeWorld operates, using icons (see the graph of WeWorld's multisectoral and interdisciplinary approach to WASH).

As follows, here are some key facts for each thematic insight.

WASH and HEALTH

- Water, sanitation, and hygiene are critical components of health and development. Microbiologically contaminated drinking water can transmit diseases such as diarrhoea, cholera, dysentery, typhoid. Infections caused by contaminated water or inadequate cleanliness pose a major threat to people's health, particularly children.
- Globally, 1.5 billion people still lack adequate sanitation (WHO, 2023b). This deficiency is responsible for about 90% of cases of diarrhoea, which is the second leading cause of mortality in children under five (Manetu et al., 2021).
- Diarrhoea is a leading killer of children, accounting for approximately 9% of all deaths among children under age 5 worldwide in 2021. This translates to over 1,200 young children dying each day (UNICEF, 2024a).
- WeWorld works in the most vulnerable areas, improving WASH services both at household level and in healthcare facilities and to strengthen the community resilience by promoting uptake of optimal hygiene and nutrition related practices especially among the most vulnerable groups, namely children under five and pregnant and lactating women.

WASH and INCLUSION

- In 2022, more than 1 billion people in rural areas did not have access to water and basic sanitation facilities in their homes (WHO/UNICEF, 2023).
- People living in vulnerable situations are twice as likely to lack access to safe, drinkable water (WHO/UNICEF, 2023).
- Following the "leave no one behind" principle, WeWorld intervenes on be-

half of people on the margins, whose needs are frequently disregarded, and fosters community empowerment by ensuring access to WASH services for every member of the community.

WASH and COMMUNITY-RESILIENCE

- Water scarcity increases most rapidly in regions affected by internal instability, conflicts, and natural disasters (World Resource Institute, 2015).
- The global water crisis is primarily a governance crisis: poor resource management, institutional and structural inefficiencies, insufficient financial investments, and corruption negatively affect the performance of water services in many countries.
- Interventions in the WASH sector must be designed from a long-term perspective; that is, infrastructure and services must be sustainable and provide the community with tools and skills that allow it to be prepared to manage any future crises and shocks, increasing its resilience.
- At the same time, it is important to work towards building a shared sense of citizenship and ownership on the management, maintenance and protection of water resources and services, including compliance with user payments. Good governance is achieved on various levels, not only by institutions or service providers. It is also important to consider the responsibility that the end user must bear. Whoever receives the water service must understand how the water supply and distribution cycle works, as well as how it is through end-user payment that service sustainability is guaranteed.
- WeWorld provides humanitarian aid in emergency contexts, guaranteeing prompt and effective responses to the affected populations and simultaneously creating the most favourable conditions for their future autonomous development by collaborating with communities, local stakeholders and service providers, and international actors, including research centres and universities to enhance innovation in our WASH interventions.

WASH and CLIMATE

- The effects of climate change (raising temperatures, increased and more frequent extreme weather events, etc.) reduce the availability of safe drinking water and, instead, amplify the risk of diseases caused by its contamination, threatening livelihoods, hygiene practices, and the health of communities. Moreover, scarcity of water resources results in higher costs of water that can cause inequalities in access.
- Extreme weather, climate and water-related events caused 11,778 reported disasters between 1970 and 2021, with just over 2 million deaths and US$ 4.3 trillion in economic losses (WMO, 2023).
- In 2018, 2 billion metric tonnes of municipal solid waste were created globally, with at least 33% of that trash not being managed in an ecologically sustainable manner (World Bank, 2018). All of this puts a burden on ecosystem conservation, which is critical for the preservation of biodiversity, water, air, and soil, and hence for the well-being of communities.
- Climate change has a tremendous negative impact on water, sanitation and hygiene (WASH) services. At the same time, the WASH sector presents a huge opportunity to contribute to global adaptation and mitigation goals, through the building of a climate-resilient, low-carbon WASH sector. WeWorld's interventions aim to build inclusive and resilient communities capable of mitigating and dealing with the consequences of water scarcity and natural disasters, for example, through the creation and strengthening of water systems, implementing solutions to mitigate climate-related risks to WASH systems such as construct toilet or water point that is flood or cyclone-proof, the implementation of water-saving technologies and smart system, promoting renewable energy instead that fossil energy and environmental awareness campaigns in schools, engaging youth, with the creation of "environmental clubs" to teach students what climate change is and what causes it, showing practical ways to conserve water or protect natural resources.

WASH and CHILDREN'S RIGHTS

- Children's right to health, education, development and protection are severely jeopardised by the lack of access to water, proper sanitation facilities and hygiene items.
- In 2021, 3 out of 10 schools worldwide lacked basic water services, and more than 1 in every 4 lacked basic sanitation facilities (WHO/UNICEF, 2023).
- WeWorld works to create safe, inclusive and appropriate learning environments for all children, adolescent boys and girls, people with disabilities, etc. Moreover, WeWorld engages in awareness campaigns, child-friendly activities, and actions to promote good WASH practices for the entire community. Children's involvement and participation in WASH-related activities is fostered in WeWorld interventions.
- In emergency contexts, children exposure to violence, abuse, neglect and exploitation might increase. To avoid it and comply with the "do no harm principle", WeWorld mainstreams child protection into its WASH related activities.

WASH and GENDER EQUALITY

- Promoting access to safe, drinking water and sanitation and hygiene services for women and girls produces interconnected beneficial effects in terms of empowerment and participation, education, sexual and reproductive health, and freedom from violence and harassment.
- In countries where water resources are not available at home, in 8 out of 10 families, women and girls are primarily responsible for collecting it (WHO/UNICEF, 2023).
- Inadequate and non-gender-separated WASH services limit the ability of women and girls, as well as other menstruating people, to safely and privately manage their menstrual cycle, with risks to their sexual and reproductive health (WHO/UNICEF, 2023).
- Gender equality is at the heart of every WeWorld effort and intervention in the WASH sector, intending to increase female empowerment and combat gender discrimination. The gender mainstreaming approach, which is used at every stage of any intervention, enables us to employ gender analysis as a tool to understand the role of women in society as well as their level of engagement and involvement in decision-making processes.

WASH and BEHAVIOURAL CHANGE

- Promoting universal access to WASH requires not only interventions in services and infrastructure but also a change in communities' perspective and behaviour.
- To be truly sustainable, every WASH intervention must be accompanied by awareness-raising and informational activities on virtuous approaches to water resources and sanitation services.
- Activating change processes in people's perspective and concrete actions is a cross-cutting component of WeWorld WASH interventions. Our approach is people-centred to make the communities protagonists in awareness-raising activities so that they can act as multipliers of good practices learned.
- On key International Days (like World Water Day or Global Handwashing Day), WeWorld conducts large-scale information and awareness-raising events, applying its interventions in communities as a starting point to touch on bigger concerns and actively promote the rights of the most vulnerable people.

THE 5 REGIONAL SECTIONS

The Atlas has been divided into regional sections responding to the classification of the organisation's operational intervention regions: the Middle East, Africa, Latin America and the Caribbean, Eurasia, and the Global North. Within each section, in addition to data, maps and graphs on context-specific WASH critical issues, in-depth factsheets dedicated to WeWorld's countries of intervention are included.

The countries analysed in the different sections are:

1. **MIDDLE EAST:** Lebanon, Palestine and Syria.
2. **AFRICA:** Burundi, Burkina Faso and the Sahel region, Kenya, Libya, Mozambique, Tanzania and Tunisia.
3. **LATIN AMERICA AND CARIBBEAN:** Andean region (Bolivia and Peru), Brazil, Haiti and Nicaragua.
4. **EURASIA:** Cambodia, Moldova and Ukraine.
5. **GLOBAL NORTH:** Europe and Italy.

THE COUNTRY FACTSHEETS

In the various regional sections, in addition to data and analyses from accredited secondary sources (FAO, WHO, UNICEF, etc.), there is room for almost all WeWorld's countries of intervention, to which we have dedicated country factsheets describing our multisectoral and interdisciplinary approach to WASH, from a perspective more oriented to the programme (and, therefore, projected over the long term and anchored to the history of the country and the community) than to individual projects.

The intent is to retrace what has been done in the WASH field in the years of implementation of the WASH Global Strategy (2020-2023), reporting data directly collected by the organisation, results achieved, testimonials, lessons learned, and future prospects. Given the complexity and overlap of the needs existing in these contexts, especially in light of the old and new challenges we find ourselves dealing with, there is no country in which we operate that requires a single, specific, and sectoral intervention, in particular, when talking about WASH.

Working to guarantee universal access to adequate WASH services means, to a different extent depending on the context, working to guarantee the right to food, health, dignity, privacy, information, protection from wars and conflicts, childhood, education, gender equality, living in a healthy environment, sustainability, etc. For this reason, each country factsheet is associated with multiple icons referring to the 7 thematic insights: **the more transversal the intervention in the country, the more thematic insights are involved.**

MOVING FORWARD. CONCLUSIONS AND RECOMMENDATIONS

In 2020, WeWorld adopted its first WASH Global Strategy for the period 2020-2023. The *Flowing Futures* Atlas was created to draw together the threads of four years of implementation of that strategy, to retrace the steps taken, capitalise on the lessons learned, and explore new perspectives.

The years of strategy implementation (2020-2023) and the *Flowing Futures* Atlas development have confirmed the utmost importance of the right to water and the WASH sector in all aspects of people's lives. **The WASH sector, like flowing water, pervades and influences nearly all of our interventions.**

Through the definition of the 7 thematic insights included in the *Flowing Futures* Atlas (WASH and Health, WASH and Inclusion, WASH and Community-resilience, WASH and Climate, WASH and Children's Rights, WASH and Gender Equality, WASH and Behavioural Change), we wanted to highlight this transversality by referring our multisectoral and interdisciplinary approach to the broader framework of the 2030 Agenda.

The *Flowing Futures* Atlas demonstrates that, while water is essential to all aspects of existence and the enjoyment of all human rights, it is still a resource denied to far too many people. While waiting to equip itself with a future WASH strategy, WeWorld will use the lessons learned and collected in this Atlas to increasingly improve its interventions in the field and achieve the goal of WASH for All. This final section reports some intervention recommendations that the organisation will adopt while waiting to systematise its future strategy. These recommendations, although designed for WeWorld and for our areas of intervention, can resonate with all the actors who deal with WASH in various capacities. **Only by working together and in a synergistic manner will we be able to guarantee access to safe, clean, and drinking water for everyone.**

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GLOSSARY

GENERAL TERMS

BASIC HYGIENE SERVICE: availability of a handwashing facility with soap and water at home.

BASIC SANITATION SERVICE: improved private facility which separates excreta from human contact.

IMPROVED SANITATION SERVICE: facility which ensures the hygienic separation of human excreta from human contact and water sources. However, access to this facility does not necessarily guarantee safe conditions.

LIMITED HYGIENE SERVICE: availability of a handwashing facility lacking soap and/or water at home.

LIMITED SANITATION SERVICE: improved facility shared with other families.

NO HYGIENE SERVICE: absence of handwashing facility at home.

NO SANITATION SERVICE: open defecation.

SAFELY MANAGED SANITATION SERVICE: improved sanitation facilities that are not shared with other households and in which excreta is safely disposed of in situ or is transported and treated offsite.

UNIMPROVED SANITATION SERVICE: an unimproved facility which does not separate excrement from human contact.

WASH: acronym which stands for WAter, Sanitation and Hygiene and groups together the safeguarding of access to (and availability of) safe, drinking water, sanitation, and hygiene services. Adequate WASH services require these three components to have specific characteristics.

WASH AND HEALTH

HEALTHCARE FACILITY: a place which provides healthcare, including hospitals, clinics, outpatient care centres, and specialised care centres, such as birthing centres.

INFECTION PREVENTION AND CONTROL (IPC): a practical, evidence-based approach preventing patients and health workers from being harmed by avoidable infections. It affects all aspects of healthcare, including hand hygiene, surgical site infections, injection safety, antimicrobial resistance (which occurs when bacteria, viruses, and parasites change over time and no longer respond to medicines, making infections harder to treat) and how hospitals operate during and outside of emergencies.

MALNUTRITION: deficiencies, excesses, or imbalances in a person's intake of energy and/or nutrients. It encompasses undernutrition, which includes stunting (low height for age), wasting (low weight for height), underweight (low weight for age) and micronutrient deficiencies or insufficiencies (a lack of important vitamins and minerals); overweight; obesity and diet-related noncommunicable diseases (such as heart disease, stroke, diabetes, and cancer).

WATERBORNE DISEASE: illness caused by microscopic organisms, like viruses and bacteria, that are ingested through contaminated water or by coming in contact with faeces. It can be spread while bathing, washing, drinking water, or by eating food exposed to contaminated water.

WASH AND INCLUSION

CASH-BASED INTERVENTION (CBI): an intervention in which cash or vouchers for Non-Food Items (NFIs), including hygiene and sanitation goods or services, are provided to recipients, maximising their freedom of choice and dignity. Examples of a CBI are vouchers for purchasing of water transport services, kits and/or hygiene items, domestic hygiene services or products and water kits.

INCOME CLASSIFICATION: according to the classification adopted by the World Bank, the economies of countries are divided into four categories (low-income, lower-middle income, upper-middle income, and high-income) depending on the gross national income (GNI) per capita, based on a reference threshold updated annually. Currently, if GNI per capita is less than $1,135, the country is low-income; between $1,136 and $4,465 for low-to-moderate income; between $4,466 and $13,845 for upper-middle income; and over $13,846 for upper-middle income.

INTERSECTIONALITY: overlap of different social and individual characteristics which leads to multiple forms of discrimination against more vulnerable social categories, basing on the assumption that they are more exposed to the violation of their rights. Discrimination in accessing water can occur not only because of a single identity element (gender, age, belonging to a minority, etc.) but also (and perhaps most importantly) when these elements "intersect" between them (for example, consider the case of indigenous women, who are already disadvantaged due to their gender and minority status), resulting in multiple and cumulative discrimination. When this happens, it is vital to apply an intersectional approach, that is, to recognise and act on the possibility of specific persons being subjected to several types of discrimination to access resources.

WASH AND COMMUNITY-RESILIENCE

ACCOUNTABILITY: responsible and transparent use of power, which must be exercised to ensure the effectiveness and quality of the actions adopted and the protection and recognition of the human dignity of the community. It requires the creation of transparency mechanisms that can allow verification.

NON-REVENUE WATER (NRW): water that is produced but never reaches the end consumer. It might be tangible and material, as in the case of infrastructure leaks, or visible, as in the case of theft or measuring flaws. In both circumstances, there is not just financial waste and inefficiency in the system, but also harmful environmental consequences.

OWNERSHIP: a change of perspective in the community with respect to the intervention carried out, no longer seen as something received but one's own, for which they assume commitments and responsibilities and which they want to guarantee stability over time.

PROTRACTED CRISIS: context in which a significant proportion of the population is acutely vulnerable to hunger, disease and disruptions to livelihoods over prolonged periods, due to recurrent natural disasters and/or conflicts, longevity of food crises and insufficient institutional capacity to react to the crises.

RESILIENCE: the ability of a person or a community to use available resources to respond to, withstand, and recover from adverse situations, thus minimizing any disaster, making the return to normal life as effortless as possible. Through resilience, a community can come together and overcome any disaster, while rebuilding physically and economically.

TRIPLE NEXUS: an approach adopted in international cooperation projects based on the relationship between humanitarian aid, development, and peace. At its core is the assumption that every action, especially in an emergency, must always establish the groundwork for generating autonomy for impacted groups and fostering prospects for future advancement, with the goal of achieving peace.

WASH GOVERNANCE: set of economic, political, social, and administrative systems concerned with water usage and management. It determines who supplies water, when and how, and who, on the other side, gets water services, when and how.

WASH AND CLIMATE

BASIC WASTE MANAGEMENT: management through which, in a healthcare facility, waste is safely segregated into at least three bins, and sharps and infectious waste are treated and disposed of safely.

CLIMATE CHANGE ADAPTATION: adjusting to the current and future effects of the climate crisis, by anticipating these effects and by taking appropriate actions to prevent or minimise the damage they can cause, or taking advantage of opportunities that may arise.

CLIMATE CHANGE MITIGATION: making the impacts of climate change less severe by preventing or reducing the emission of greenhouse gases (GHG) into the atmosphere. Mitigation is achieved either by reducing the sources of these gases, or by enhancing the storage of these gases.

DISASTER RISK REDUCTION (DRR): approach aimed at preventing new disaster risks, reducing existing ones and managing residual risks, all of which contribute to strengthening resilience and therefore to the achievement of sustainable development.

WASTE MANAGEMENT: total supervision of waste production, handling, processing, storage, and transport from its point of generation to its final acceptable disposal.

WATER-ENERGY-FOOD-ECOSYSTEM (WEFE) NEXUS: link which emphasises the interdependence of water, energy, food security, and ecosystem conservation, and which identifies solutions based on existing synergies between water, energy, and agricultural policies. It involves the adoption of specific solutions at different levels, depending on the context, to achieve long-term economic, social, and environmental development.

WASH AND CHILDREN'S RIGHTS

CHILD PARTICIPATION: principle that wants to promote and protect children's right to be heard and have a say in all decisions affecting them, be that at home, in the community, at school etc.

CHILD-FRIENDLY WASH FACILITY: sanitation facility which is not only accessible but also attractive for children of all age and sex, for instance, a facility which provides mirrors which can make toilet and handwashing station's use more appealing.

INCLUSIVE LEARNING ENVIRONMENTS: safe and accessible learning environments for every child or adolescent, regardless of their age, sex or disability. Their creation can be achieved by building gender-sensitive toilets (separated and equipped for the specific needs of each person); by removing architectural barriers for people with disability; by distributing hygiene and cleaning kits; by carrying out awareness- raising activities on WASH safe behaviours.

WASH AND GENDER EQUALITY

EMPOWERMENT: process of gaining growing freedom and power to do what one's wants, especially in controlling their life and claiming their rights.

GENDER ANALYSIS: a process that aims at understanding the role played by women within societies and their degree of participation and involvement in decision-making processes, identify gender gaps, and adapt actions to the needs of different groups. During the analysis, gender balance must be guaranteed in the composition of the team, the presence of experts on gender issues must be ensured, and all data collected must be disaggregated by sex and age.

GENDER MAINSTREAMING: approach adopted at every stage of any intervention which entails the listening and the involvement of women and girls to clearly identify their specific needs and meet them in a targeted, relevant manner. It involves a base needs assessment on an understanding of gender roles and necessities, as well as gender-based vulnerabilities related to discrimination, risks of gender-based violence, etc.

GENDER-BASED VIOLENCE: violence directed against a person because of that person's gender, or which affects persons of a particular gender, such as women, disproportionately.

MENARCHE: first menstruation, which normally occurs between the ages of 10 and 16 and is affected by genetic and environmental factors. It is related to female puberty, marking the hormonal changes that allow reproduction.

MENSTRUAL HEALTH AND HYGIENE MANAGEMENT: clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear.

MENSTRUAL HEALTH: a complete state of physical, mental, and social well-being during the menstrual cycle, rather than simply the absence of disease or infirmity. It goes beyond the simple management of the menstrual period to include the entire menstrual cycle as well as general health and well-being, thus encompassing broader systemic factors that link menstruation with health like general well-being, gender equality, education, equity, empowerment, and rights.

MENSTRUAL HYGIENE: it refers to the types of hygiene products used to deal with menstruation or the daily process of menstrual hygiene management. However, the term has a negative connotation, which reinforces the stigma that menstruation is dirty or impure.

MENSTRUATION: normal discharge of blood and tissue from the uterine lining through the vagina that occurs as part of a woman's monthly menstrual cycle. Menstruation occurs between menarche, a girl's first period, and menopause, when menstrual cycles end.

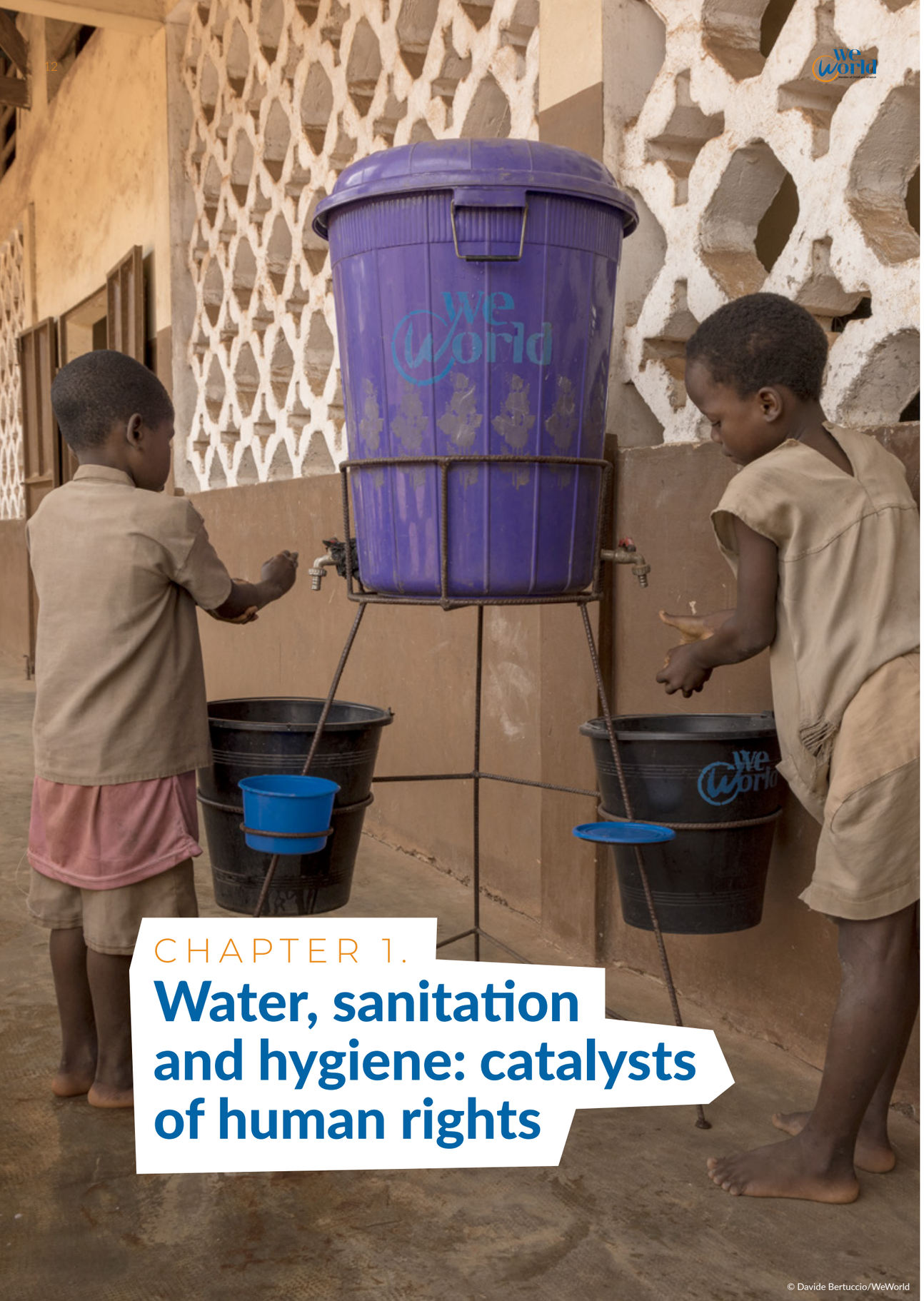
MENSTRUATORS: preferrable and more inclusive term to indicate all people that menstruate, not only girls and women but also transgender men, non-binary and intersex people.

SEX-SEPARATED TOILETS: separation of toilets into male and female to better address their biological and social differences and necessities.

WASH AND BEHAVIOURAL CHANGE

AWARENESS-RAISING: process that seeks to inform and educate people about a topic or issue, with the intention of influencing their attitudes and behaviours towards it as well as increasing its public understanding.

INTERNATIONAL DAY: Day dedicated to raising awareness of a topic of international interest, often established and promoted by the UN General Assembly, the UN Economic and Social Council or UNESCO to mobilize political forces to channel resources to solve global problems.



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CHAPTER 1.

Water, sanitation and hygiene: catalysts of human rights

1.1. THE RIGHT TO WATER

Water is vital for people and the planet to thrive and to meet any essential need, but around 2 billion people still do not have access to clean, safe, and drinking water (WHO/UNICEF, 2023).

There are several reasons for this exclusion: physical lack of available water, which is also a result of climate change (this involves increasingly extreme meteorological phenomena and an increase in average global temperatures altering precipitation patterns and the entire natural cycle of waterfalls); lack or inadequacy of infrastructure; and failure of institutions to ensure a reliable and adequate supply of water (UN Water, 2023).

Water scarcity and pollution have a cascade of negative consequences that affect people's health, nutrition, education, and other areas of their lives. As a result, access to safe water has long been acknowledged as a fundamental human right. This must be interpreted as an equal, non-discriminatory right for all to have sufficient, safe, physically accessible, and economically affordable access to water for personal and home use to promote quality of life and health.

However, the 1948 Universal Declaration of Human Rights[1] does not specifically identify or safeguard this right. To address this issue, at first, the recognition of access to water as a human right was drawn from the protection of the right to life (given the critical link between water and human survival) and, afterwards, as an extension of the right to an adequate and dignified standard of living[2]. Finally, **the explicit recognition and protection of the right to water occurred only with the United Nations General Assembly's Resolution 64/292 in 2010**[3], with which the international community recognised it as an essential human right for the exercise of other fundamental rights, such as the right to health, food, and education. As a result, it is a right intrinsically related to life and human dignity[4].

> The right to water is intrinsically related to the rights to life and human dignity.

A NEW COMMITMENT FOR FUTURE WATER SECURITY: THE WATER ACTION AGENDA 2023

In March 2023, the right to water was addressed in a second world conference organised by the United Nations to promote and improve water management policies at a global level[5]. Referring to the 2030 Agenda and the 17 Sustainable Development Goals[6], the conference reiterated that water plays a vital role in linking the climate, human society, and the environment. More specifically, **water keeps ecosystems healthy, reduces the spread of global diseases, promotes female empowerment and gender equality, improves populations' well-being, and favours peace. For these reasons, not guaranteeing universal access to safe and drinking water jeopardises overall global development**.

The conference culminated in the **Water Action Agenda**[7], which currently contains more than 700 global and local actions aimed at counteracting the water-related impacts on climate and biodiversity, as well as the emergence of new tensions on the management and control of this resource[8].

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1 The Declaration is available here https://www.ohchr.org/sites/default/files/UDHR/Documents/UDHR_Translations/itn.pdf.

2 Guaranteed by Article 11 of the United Nations Convention on Economic, Social, and Cultural Rights (1966), which, in the first paragraph, expressly states that the States Parties "recognise the right of every individual to an adequate standard of living for himself and for his family, including adequate food, clothing, and shelter, as well as the right to continuous improvement of living conditions...". The Convention is available at https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights#:~:-text=Article%2011,-1.&text =1.-, The%20States%20Parties%20to%20the%20present%20Covenant%20recognize%20the%20right,continuous%20improvement%20of%20living%20conditions.

3 The Resolution is available at https://digitallibrary.un.org/record/687002.

4 Besides, as stated explicitly by the United Nations Human Rights Council in Resolution 15/9 of 2010. The text of the Resolution may be found at https://daccess-ods.un.org/tmp/9520536.06510162.html.

5 The conference was held forty-five years after the one in Mar de La Plata, which, in 1977, represented the first international initiative to discuss the right to water. More information about the New York Conference, held on March 22–24, 2023, is available at https://sdgs.un.org/conferences/water2023.

6 Goal 6.1 aims to "Achieve universal and equitable access to safe and affordable drinking water for all by 2030."

7 The Agenda is available here https://sdgs.un.org/conferences/water2023/action-agenda.

8 The actions range from research plans and the creation of control infrastructures, purification, desalination, and extraction from ultra-deep aquifers, up to resource management and control reforms.

Access to water must be promoted in such a way that every individual's dignity, health, and life are respected. To achieve this goal, it is not enough to just promote material access to water, i.e., ensuring that the individual has access to a particular amount of concretely available water; it is also required that this water fulfils certain criteria[9].

- → **AVAILABILITY:** The quantity of water available for each person must be continuous, i.e., **regular and without interruptions for at least 12 hours**, and sufficient for personal and domestic uses: drinking, personal hygiene (understood both as washing one's body and disposing of excrement), household cleaning, washing clothes, and preparing food[10].
- → **QUALITY:** The water used for personal and domestic use must be safe, i.e., **free of microorganisms, chemical substances, or other risks that pose a threat to human health**. Also, it should have an **acceptable colour, odour, and taste.**
- → **ACCESSIBILITY:** Water, water facilities and water services **must be accessible to all without discrimination.** This characteristic, which can vary depending on social, structural, and individual factors, is outlined based on four overlapping dimensions:
  - » **Physical.** Accessibility should be ensured inside or near every household, educational institution, and workplace. In addition, all water systems and services should be suited to cultural and gender demands, and there should be no risk to personal safety while utilising them[11].
  - » **Economical.** Water, water facilities and services should be affordable to everyone, and the expenses associated with collection, supply, and management should not jeopardise or threaten the enjoyment of the right to water, by making it dependent on people's financial availability[12].
  - » **Non-discriminatory.** Water, water facilities and services should be available to everyone, regardless of age, gender, ethnicity, geographical origin, socio-cultural background, religious orientation, economic condition, or other factors.
  - » **Information.** Finally, accessibility includes a "cognitive" component, which is the person's right to seek, receive, and convey information about any water-related issue. This includes the right of individuals and groups to participate in decision-making processes that may affect the exercise of the right to water, following the principles of non-discrimination and participation.

9 For the modalities adopted by WeWorld to ensure these criteria, see paragraph 1.3.

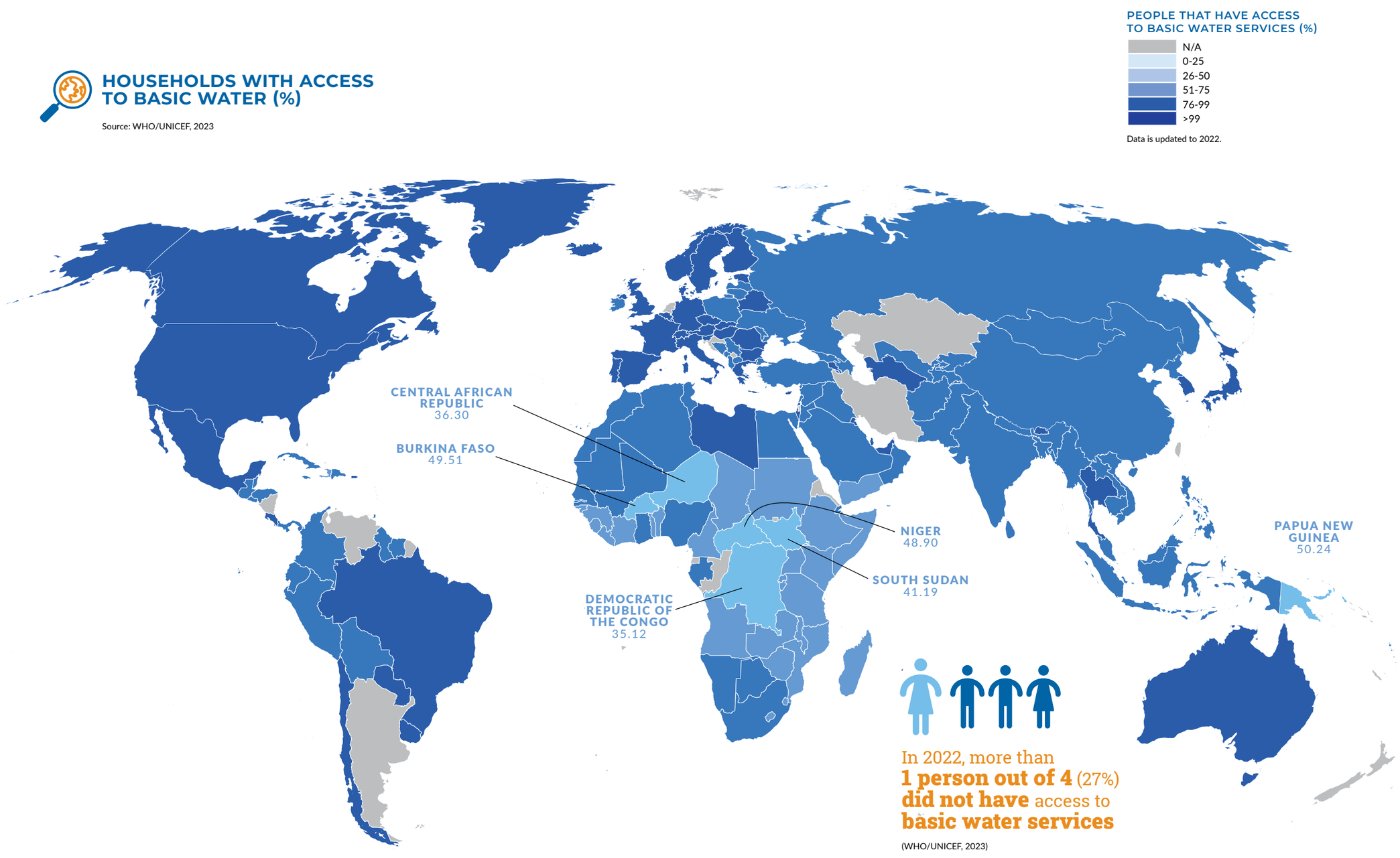
10 Here we are referring to basic needs to which, for some social groups, further needs can be added due to particular health, housing, or climatic conditions.

11 According to WHO, the water source must be within a radius of 1,000 metres from the house, and the collection time should not exceed 30 minutes (WHO, 2003).

12 According to WHO, economic affordability is respected if the cost does not exceed 5% of family income (WHO, 2003).

HOUSEHOLDS WITH ACCESS TO BASIC WATER (%)

Source: WHO/UNICEF, 2023



HOW MUCH WATER DO WE NEED?

According to the Guidelines adopted by the World Health Organisation,

the **minimum quantity of water** necessary for each person to satisfy their basic needs (drinking, cooking, personal, and domestic hygiene) and to live in good health conditions is approximately **50 litres per day**

50 per day

(WHO, 2003)

Drinking:
Between **3 litres** and approximately **4.5 litres** per day per capita[13]

(WHO,2003)

Eating and cooking:
2-3 litres of water per capita per day for food preparation

(WHO, 2003)

Hygiene:
20 litres of water per capita per day for washing and cleaning the house

(WHO, 2003)

As a result of global population growth and the adoption of resource-intensive economic consumption patterns, global freshwater use (for municipal uses, i.e., domestic, industrial, and agricultural) **has increased nearly sixfold since 1900** (Our World in Data, 2023).

13 Depending on whether you live in temperate or warm climates and whether you do manual labour.

...BUT HOW MUCH DO WE USE?

Italy:
About **245 litres** of daily water consumption per capita, of which **50 litres just for showering**

245 per day

(Agi, 2022)

USA:
Each American uses an average of **310 litres** of water a day at home

310 per day

(USEPA, 2023)

EU:
In 2021, between **40 and 50 cubic metres** of water per capita were consumed in the EU, i.e., between **40,000 and 50,000 litres per year** (more than **130 litres** per day)

130 per day

(Eurostat, 2023)

MINIMUM STANDARDS

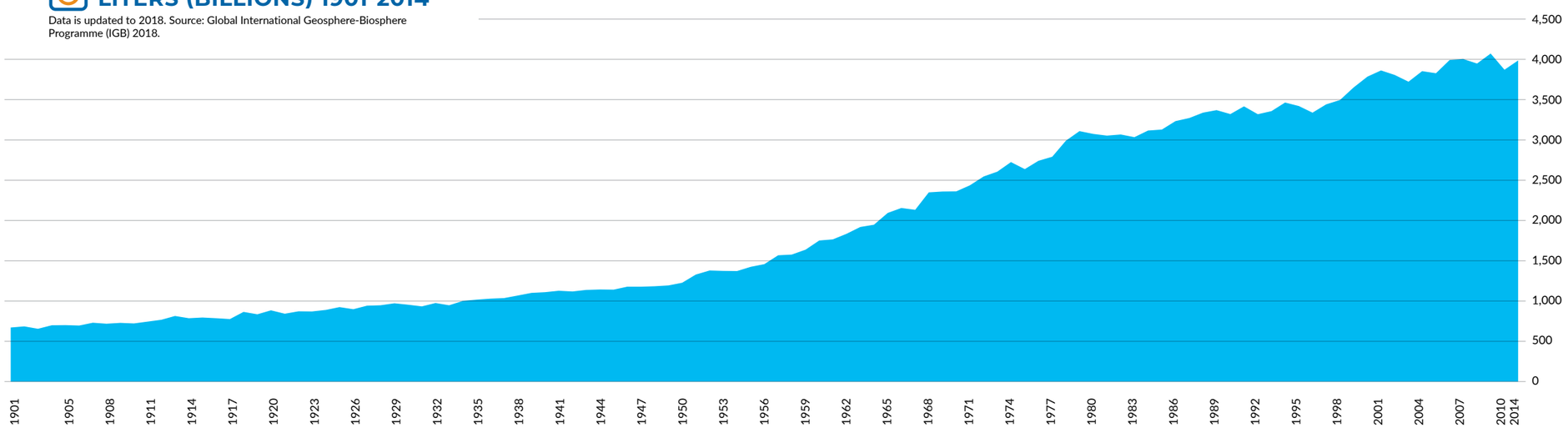
Source: Sphere, 2018

Basic survival needs (use of water for drinking and eating)	**2.5-3 litres** per person per day
Personal hygiene	**2-6 litres** per person per day
Nutritional needs (use of water to wash food)	**3-6 litres** per person per day
Hospitals and healthcare facilities	**5 litres** per clinic **40–60 litres** per patient per day **100 litres** for surgery Additional quantities for washing and sanitising clothes and healthcare instruments
Centres for viral haemorrhagic fever	**300-400 litres** per patient per day
Therapeutic feeding centres	**30 litres** per patient per day **15 litres** per operator per day
Mobile clinics with infrequent visits	**1 litre** per patient per day
Mobile clinics with frequent visits	**5 litres** per patient per day
Oral rehydration points for children	**10 litres** per patient per day
Reception or transit centres	**3 litres** per person for a one-day stay **15 litres** per person for stays lasting more than one day
Schools	**3 litres** per day per child for washing hands and drinking

14 In the specific case of cholera centres, 60 litres per patient per day and 15 litres per operator per day are needed.

GLOBAL FRESHWATER USE IN LITERS (BILLIONS) 1901-2014

Data is updated to 2018. Source: Global International Geosphere-Biosphere Programme (IGB) 2018.



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Guaranteeing these specific conditions of access to water is even more important in emergency contexts (conflicts, epidemics, natural disasters, etc.) **where minimum levels of safe drinking water are essential for the survival of affected populations, who are more likely to contract diseases linked to inadequate sanitation and insufficient or unsafe water supplies** (primarily diarrhoeal diseases and diseases transmissible through faeces). In such circumstances, access to water is important not only for preventing disease transmission or exposure to pathogen vectors but also for preserving people's dignity and meeting their basic needs in their daily routines (drinking, washing, going to the toilet) safely (The Sphere Project, 1998). **To safeguard the rights of people impacted by the emergency, minimum criteria have been set that determine the amount of water that must be provided (i.e., 15 litres) for personal and household use, as well as thresholds that must be met in public services and infrastructure** (Sphere, 2018).

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(Sphere, 2018)

ACCESS TO WATER AND INTERSECTIONALITY

Water access, use, and control are frequently denied to marginalised people or social groups that already face forms of discrimination or exclusion because of their characteristics and social identity. **Ensuring universal and complete access to water is a matter of equality and social justice.** Above all (but not exclusively), social groups most vulnerable to exclusion from water access are:

- **WOMEN AND GIRLS.** Due to deeply rooted gender roles and stereotypes, women and girls in many areas of the world have the primary responsibility of providing for the family's domestic and care requirements. They must travel long distances to collect water, bearing the physical burden of transportation, which can increase health risks (such as uterine prolapse, musculoskeletal problems, and stress) and expose them to physical, mental, and sexual violence (see WeWorld (2023), *WE CARE Atlas*). Furthermore, pregnant women are at a higher risk of contracting illnesses such as malaria, typhoid, dysentery, and intestinal, liver, or multi-organ infections, which can lead to miscarriage and the death of both the foetus and the mother (FIGO, 2019). Finally, a lack of access to water and soap leaves sanitation needs for hygiene and menstrual health unfulfilled, increasing the risk of urogenital infections (UN Water, 2018).
- **CHILDREN.** Water is necessary for children's growth and psychophysical development, as they require more water than adults to maintain an acceptable hydration level. Water deprivation might have irreparable consequences for their physical and mental development. Furthermore, access to safe drinking water and adequate sanitation is inextricably related to their education; school learning and, more broadly, future development and growth can be greatly hampered if the school lacks access to potable water or quality sanitation services. In these circumstances, children are more likely to contract infections and, as a result, to drop out of school, with implications for their future (Water Aid, 2010).
- **ETHNIC, RELIGIOUS, AND CULTURAL MINORITIES.** Minorities may face increased isolation, which can result in marginalisation when it comes to access to water. Just think about indigenous peoples, for whom it has a socio-cultural significance related to ancestral customs and lifestyle, which are inextricably tied to the surrounding ecosystem and nature (UNHCR, 2022). For these communities, water is a common good, part of a broader interconnected natural, social, and cultural system; thus, the limitation (if not exclusion) of access to and management of water undermines indigenous populations' rights and contaminates water sources on their lands, often jeopardising their livelihoods and violating their right to self-determination[15].
- **PEOPLE WITH DISABILITIES OR WHO COME FROM A LOW-INCOME FAMILY.** The former may face discrimination in getting water owing to physical and societal restrictions; the latter, for instance, due to a disparity in access to water between urban and rural regions. Poorer people are less likely to have access to safe, clean water and to have the financial and human resources required to handle the consequences of this deprivation (UN Water, 2018)[16].

Discrimination in accessing water can occur not only because of one of these elements (gender, age, belonging to a minority, etc.) but also (and perhaps most importantly) **when these elements "intersect" between them** (for example, consider the case of women of colour, who are already disadvantaged due to their gender and non-white status[17]), **resulting in multiple and cumulative discrimination**. When this happens, it is vital to apply an intersectional approach, that is, to recognise and act on the possibility of specific persons being subjected to several types of discrimination to access resources.

15 That is, according to the United Nations Declaration on the Rights of Indigenous Peoples (2007), the right to freely determine their political status and to pursue, equally freely, their economic, social, and cultural development. Its promotion therefore requires ensuring that these social groups also have fair and non-discriminatory access to the resource and respecting their right to free and well-informed consultations and to consent before any intervention in their territories according to a respectful intercultural approach, to their ancestral visions, knowledge, and practices (ibid.).

16 To learn more about the issue of existing inequalities between urban and rural areas in accessing water and sanitation, see the section WASH and Inclusion in paragraph 2.

17 Consider the case of an indigenous woman, for whom the discriminatory effects of belonging to the female sex and to a cultural minority are cumulative. In similar cases, we talk about intersectionality to refer to the overlap of different social identities and forms of discrimination against more vulnerable social categories, and it is based on the assumption that they are more exposed to the violation of their rights. If, therefore, these people belong to multiple categories at the same time, they also run a greater risk of suffering overlapping forms of discrimination (gender, ethnic, racial, ableist, etc.).

WATER: A COMMON GOOD

The way people think of water as a product to be purchased, rather than a communal resource to be conserved, is a critical issue in terms of water access, sustainability, and social and intergenerational justice. Water is a good taken for granted, even though it is not endless. This is why it is critical to shift viewpoints and develop a global resilience perspective when it comes to water management, particularly considering climate change's impacts, making water conservation increasingly necessary.

To address water scarcity, it is paramount, on the one hand, to reduce waste and repair losses in distribution networks and infrastructures, addressing the causes rather than the symptoms; on the other, to adopt more efficient resource use methods with fairer processes for sharing the benefits of its use through participatory, fair, and transparent approaches (UN, 2023).

Promoting the right to water requires safeguarding the environment, ecosystems, and planet, as well as all people's lives and rights. Adopting a broader and more thorough strategy is fundamental to secure access to water and the other rights that arise from it, most notably (but not alone) sanitation and hygiene rights.

> Safe drinking water, sanitation, and hygiene services are essential for ensuring human health and well-being while contributing to the improvement of other aspects of individual and community life, such as livelihood, work, housing, and education for all, on the one hand, and the development of resilient communities and a healthy environment on the other.
>
> (UN, 2023)

1.2. FROM THE RIGHT TO WATER TO WASH

Access to drinking water is required for the enjoyment of other human rights, such as the right to food, education, housing, health, and work, as well as the right not to be subjected to cruel, inhuman, or degrading treatment. It is also essential for achieving gender equality and eradicating all discriminations. Starting from these assumptions, the right to sanitation and hygiene services has been explicitly recognised. **This entails having physical access to and using safe, high-quality, socially and culturally sensitive sanitation and hygiene services that safeguard one's privacy and dignity in all aspects of life**[18].

The acronym **WASH (WAter, Sanitation, and Hygiene)** was coined in the context of international cooperation to refer to the interventions implemented – primarily in countries of the Global South – to safeguard access to water, sanitation, and hygiene services in a coordinated and unitary manner. Access to and availability of similar services is essential for the protection of health, dignity, and development (UNOHCR, 2015).

Safe drinking water, sanitation, and hygiene services are essential for ensuring human health and well-being while contributing to the improvement of other aspects of individual and community life, such as livelihood, work, housing, and education for all, on the one hand, and the development of resilient communities and a healthy environment, on the other (WHO, 2023a).

Nonetheless, despite acknowledgement of this concept, some nations' law continues to lack clear expressions and references to these rights.

In addition to their formal recognition, the concrete promotion of these rights still faces obstacles: **unsafe sanitation represents one of the largest health and environmental problems in the world, particularly for the poorest people, and is responsible for 775,000 deaths every year** (Ritchie and Roser, 2021). Difficulty in accessing adequate sanitation is a significant risk factor for infectious diseases, including cholera, diarrhoea, dysentery, hepatitis A, typhoid, and polio. Furthermore, it aggravates malnutrition and is linked to children stunting (ibid.).

The number of deaths due to a lack of access to sufficient sanitation varies substantially between countries, with a high peak in low-income countries. A lack of adequate and safe sanitation services, like challenges in accessing drinking water, is mostly limited to low- and middle-income countries and is thus a manifestation of severe inequality.

Poor sanitation has an impact not just on people's health, but also on the environment, polluting springs, rivers, lakes, and land with faeces and poisoning already scarce water resources (World Toilet Day, 2022). As a result, **it is critical to make investments to ensure that everyone has safe access to so-called "improved" sanitation services**.

The lack of sanitation facilities forces people to engage in alternative practices, such as open defecation (in fields, forests, bushes, or other open spaces), which not only violates the human dignity of the individual but also poses a high risk to the community's health, by polluting the environment and water sources and increasing the likelihood of disease transmission (WHO/UNICEF, 2023)[19].

18 As stated by the United Nations General Assembly, which, in 2015, recognised the right to sanitation services as a distinct right but linked to access to safe and drinkable water, The resolution is available on https://digitallibrary.un.org/record/821067?ln=en.

19 For this reason, the elimination of open defecation is considered an absolute priority to improve the health, nutrition, and productivity of the populations of the countries of the Global South and is explicitly mentioned in Sustainable Goal 6.2.

COUNTRIES THAT DO NOT RECOGNISE WATER AND/OR SANITATION AS HUMAN RIGHTS IN CONSTITUTION OR OTHER LAW

Data is updated to 2021 and refers to 124 countries with available information. Source: GLAAS/WHO 2023.

COUNTRY	POPULATION
Brazil	214,313,000
Italy	59,110,000
Norway	54,080,000
Sudan	45,660,000
Iraq	45,530,000
Panama	43,510,000
Ghana	32,830,000
Jamaica	28,280,000
Lesotho	22,810,000
Sri Lanka	22,160,000
Malawi	19,890,000
Chile	19,643,443
Senegal	16,880,000
Guinea	13,530,000
Mauritius	12,660,000
Haiti	11,450,000
Jordan	11,150,000
Croatia	3,899,000
Trinidad and Tobago	1,526,000
Estonia	1,331,000
Guyana	804,567
Grenada	124,610
Tuvalu	11,204

THE CATEGORIES OF SANITATION SERVICES

(WHO/UNICEF, 2023)

- → **IMPROVED:** facilities that ensure the hygienic separation of human excreta from human contact and water sources. However, access to these facilities does not necessarily guarantee safe conditions.
- → **SAFELY MANAGED:** improved sanitation facilities that are not shared with other households and in which excreta is safely disposed of in situ or is transported and treated offsite.
- → **BASIC:** an improved private facility that separates excreta from human contact.
- → **LIMITED SERVICE:** improved facility shared with other families.
- → **UNIMPROVED SERVICE:** an unimproved facility that does not separate excreta from human contact.
- → **NO SERVICE:** open defecation.

THE CATEGORIES OF HYGIENE SERVICES

(WHO/UNICEF, 2023)

- → **BASIC:** Availability of a handwashing facility with soap and water at home.
- → **LIMITED:** Availability of a handwashing facility lacking soap and/or water at home.
- → **NO FACILITY:** No handwashing facility at home.

In 2021, globally **more than 681 million people** were living in a country that did not recognise **water and sanitation as human rights**

PEOPLE THAT ARE FORCED TO RESORT TO OPEN DEFECATION (%)

Only countries scoring above the global average of 5% are reported. Data is updated to 2022. Source: WHO/UNICEF, 2023.

Niger	64.99
Chad	62.61
South Sudan	59.71
Benin	48.50
Sao Tome and Principe	42.19
Togo	39.47
Namibia	37.16
Liberia	35.24
Madagascar	33.63
Burkina Faso	33.55
Kiribati	32.75
Mauritania	26.87
Central African Republic	25.04
Somalia	21.32
Côte d'Ivoire	21.20
Mozambique	19.59
Nigeria	18.44
Haiti	17.73
Ethiopia	17.64
Zimbabwe	17.31
Angola	17.29
Ghana	17.22
Sierra Leone	16.43
Lao People's Dem. Rep.	16.15
Papua New Guinea	16.10
Djibouti	15.99
Lesotho	14.99
Cambodia	12.08
Dem. Rep. of the Congo	11.85
India	11.10
Timor-Leste	10.36
Afghanistan	8.84
Marshall Islands	8.68
Yemen	8.57
Bolivia (Plurinational State of)	8.55
Cabo Verde	8.54
Guinea-Bissau	8.43
Senegal	7.71
Guinea	7.15
Nepal	6.98
Myanmar	6.81
Pakistan	6.75
Kenya	6.45
Zambia	6.41
United Republic of Tanzania	6.32
Saint Lucia	6.19
Wallis and Futuna Islands	5.84
Botswana	5.21
Mongolia	5.03

In **Niger**, **2** people **out of 3** are still **forced to** resort to **open defecation**

(WHO/UNICEF, 2023)

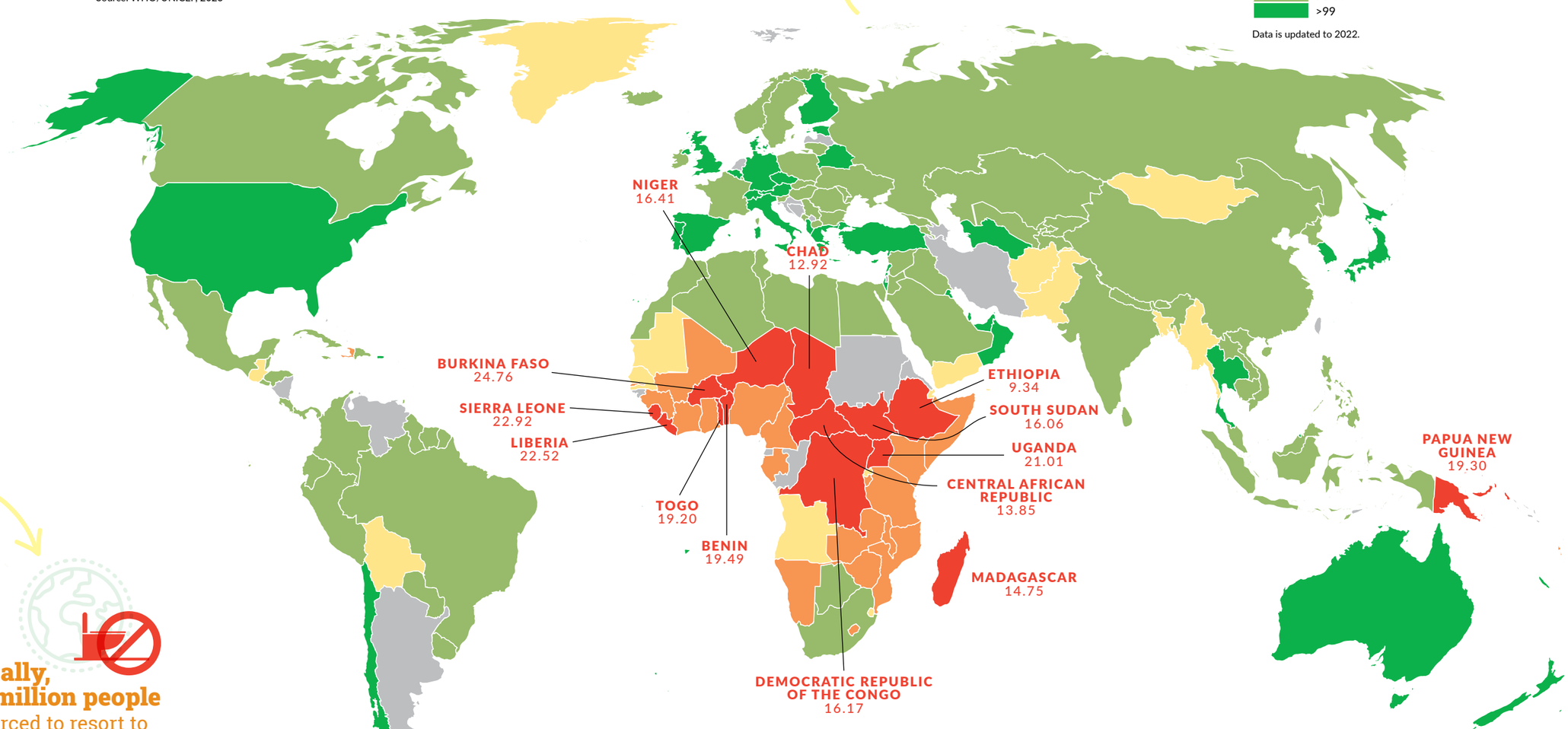
In 2022, **57%** of the global population (4.5 billion people) **used safely managed sanitation services**

(WHO/UNICEF, 2023)

Although global coverage of primary health services rose from 73% to 81% between 2015 and 2022, this remained below 75% in 54 countries, while in 13 countries, less than half the population had access to them. In total, the number of people without basic health services is 1.5 billion (WHO/UNICEF, 2023).

PEOPLE THAT HAVE ACCESS TO BASIC SANITATION SERVICES (%)

Source: WHO/UNICEF, 2023

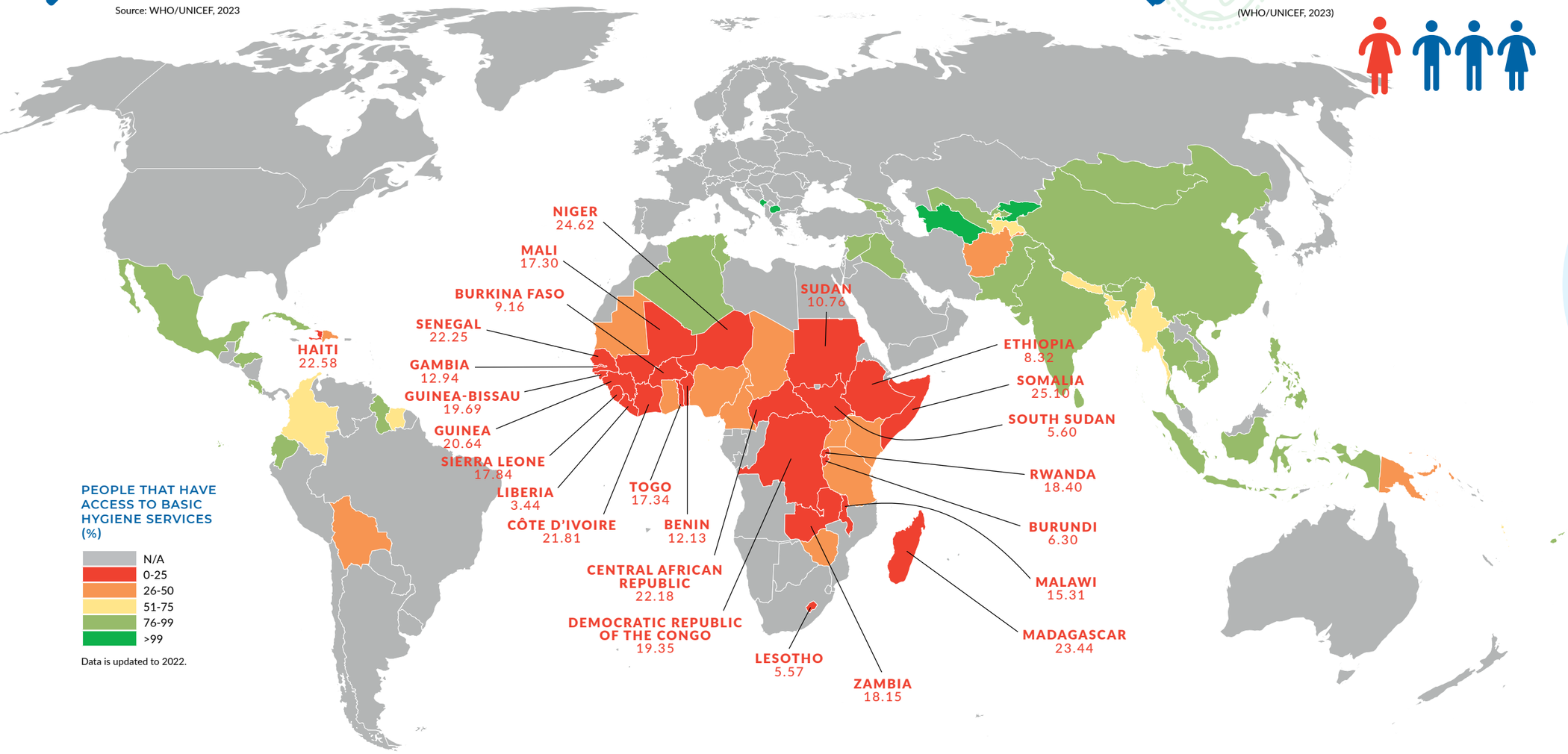


Globally, 419 million people are forced to resort to open defecation

(WHO/UNICEF, 2023)

PEOPLE THAT HAVE ACCESS TO BASIC HYGIENE SERVICES (%)

Source: WHO/UNICEF, 2023



In 2022, **1 person out of 4** globally **did not have** access to **water and soap**

(WHO/UNICEF, 2023)

WeWorld works within the framework of the 2030 Agenda, both in emergency and development contexts, to ensure universal, adequate, and safe access to water and sanitation (including hygiene), while also promoting and guaranteeing other fundamental rights through a culturally, socially, economically, and environmentally sustainable approach, with a focus on marginalised people and communities.

1.3. THE PILLARS OF WEWORLD'S WASH INTERVENTIONS

When we say that we want to universally ensure safe access to water and quality sanitation services through our interventions, **we imply everything from education to hygiene to raising awareness in water resource management, from economic accessibility to cultural dynamics, from including the most vulnerable groups to environmental sustainability**.

Water is a universal human right and a necessary condition for the effective realisation of many other fundamental rights, such as the right to life, food, health, education, shelter, and work. **Lack of access to clean drinking water and basic sanitation may consequently have a negative influence on millions of people's lives, robbing them of their right to live in dignity.**

The poorest people, those on the margins, are frequently denied availability and access to these services: an increasing number of people worldwide live in urban slums with inadequate sanitation, while climate change threatens water resources, affecting the most vulnerable communities and exacerbating inequalities.

For these reasons, **WeWorld works within the framework of the 2030 Agenda, both in emergency and development contexts, to ensure universal, adequate, and safe access to water and sanitation (including hygiene) while also promoting and guaranteeing other fundamental rights through a culturally, socially, economically, and environmentally sustainable approach, with a focus on marginalised people and communities**. To that end, we use interdisciplinary skills developed in the field and we strengthen inter-sectoral collaboration to arrive at holistic solutions based on the activation of processes of profound change in society, emphasising community involvement and responsibility towards people who are beneficiaries of our interventions. These elements, in conjunction with the organisation's policy[20], which includes the organisation's mission, vision, and principles have guided the planning of the **WASH Global Strategy 2020-2023. Promoting Access to WASH Worldwide. The WASH Strategy aims to define the ways in which WeWorld provides access to water and sanitation in contexts of conflict, protracted crises, and sustainable development and is based on 4 strategic pillars, approaches, and programmatic modalities.**

20 The policy encompasses and defines the organisation's principles, values, and standards of conduct, helping to ensure that these are supported and implemented through activities. It plays an important role in creating organisational culture, shaping decisions, and providing a framework for daily activities.

THE 4 STRATEGIC PILLARS

1. WASH FOR ALL: AVAILABILITY, ACCESS AND QUALITY

Water availability entails always ensuring sufficient quantity and reliable services, both at domestic and public levels. However, quality is a feature that connects the water supply to its use. To ensure it, in addition to building services, we increase water monitoring and management capabilities to ensure its drinkability, hygiene, and safety. However, availability does not always translate into access to water and sanitation; various factors can obstruct this, including institutional management challenges, extraction costs, and the unique needs of some groups (people with disabilities, women, children, and the elderly), who are frequently overlooked.
Faced with these constraints, **we intervene with a human rights-based approach infused with the principles of gender equality, inclusion, and "leave no one behind," and we promote the protagonism and empowerment of local communities to avoid water waste, ensure the sustainability of interventions, and provide access to all segments of the population.**

2. EQUITY AND INCLUSION

To ensure service equity and inclusion, we must examine the specific requirements of the most disadvantaged populations, as well as the implications and ramifications of our programmes on them. To that end, their participation in all programme phases is critical. **Gender equality, for example, is at the heart of WASH interventions to promote the empowerment and inclusion of women and other people who are excluded because of their gender, as well as to combat all forms of prejudice and injustice**.
In this sense, we use gender analysis[21] as a tool to steer our projects and activate participatory procedures aimed at including them.
Similarly, **our WASH approach investigates and integrates the requirements of people with disabilities, fostering social inclusion and combatting prejudice.**

3. STRENGTHEN LOCAL WATER GOVERNANCE AND CAPACITY

Water governance refers to the political, social, economic, and administrative players who affect who has access to water, when and how, and who has rights to it. Our purpose is to contribute to transparent and participatory governance procedures, which are critical to ensure sustainable and equitable water resource use and expand access to sanitation and clean water for all. This is why the keyword of our interventions is "responsibility", both amongst institutions and towards civil society.
WeWorld promotes good water and WASH service management **by strengthening local participation, community engagement, and empowerment, as well as involving universities and research centres and ensuring that institutions improve their ability to respond to the population's needs fairly and sustainably, ensuring service for the benefit of all.**

4. COMMUNITY ENGAGEMENT AND EMPOWERMENT

Water and sanitation services are frequently unavailable to the most disadvantaged and marginalised groups. As a result, **democratising management processes through increased participation, inclusion, transparency, and accountability is critical.**
WeWorld facilitates the protagonism of people and civil society through a person- and community-centred approach to engage excluded voices, promote mutual trust among stakeholders, and protect their environment and ecosystems to guarantee the full right to water and sanitation services in a sustainable and non-discriminatory manner.

21 Gender analysis is a process that aims to understand the role played by women within societies and their degree of participation and involvement in decision-making processes, identify gender gaps, and adapt actions to the needs of different groups. During the analysis, gender balance must be guaranteed in the composition of the team, the presence of experts on gender issues must be guaranteed, and all data collected must be disaggregated by sex and age and analysed in collaboration with experts in the cooperation, such as UN Women, the WASH Cluster Gender Focal Point, and local women's associations.

These 4 pillars[22] are always implemented from a context-specific standpoint; that is, they are tailored to the unique characteristics of the given scenario. This provides for a long-term vision capable of fostering community resilience (following the Human Development Peace Nexus principles[23]).

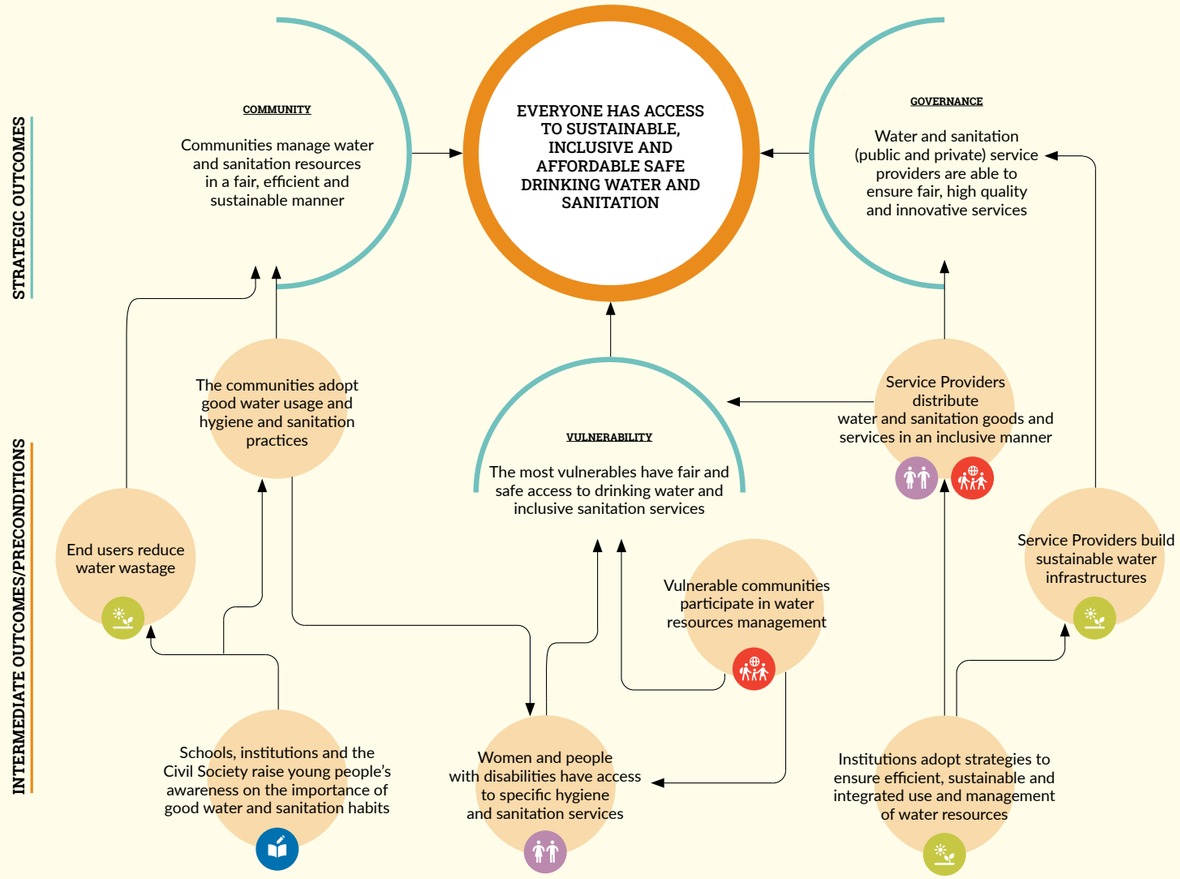
22 In turn, these are linked to programmatic approaches and modalities, which guide our interventions from the conceptual phase to implementation: the human rights-based approach, the equity and inclusion approach, the leave no one behind principle, the promotion of endogenous change processes, the multisectoral approach, and the humanitarian-development nexus.

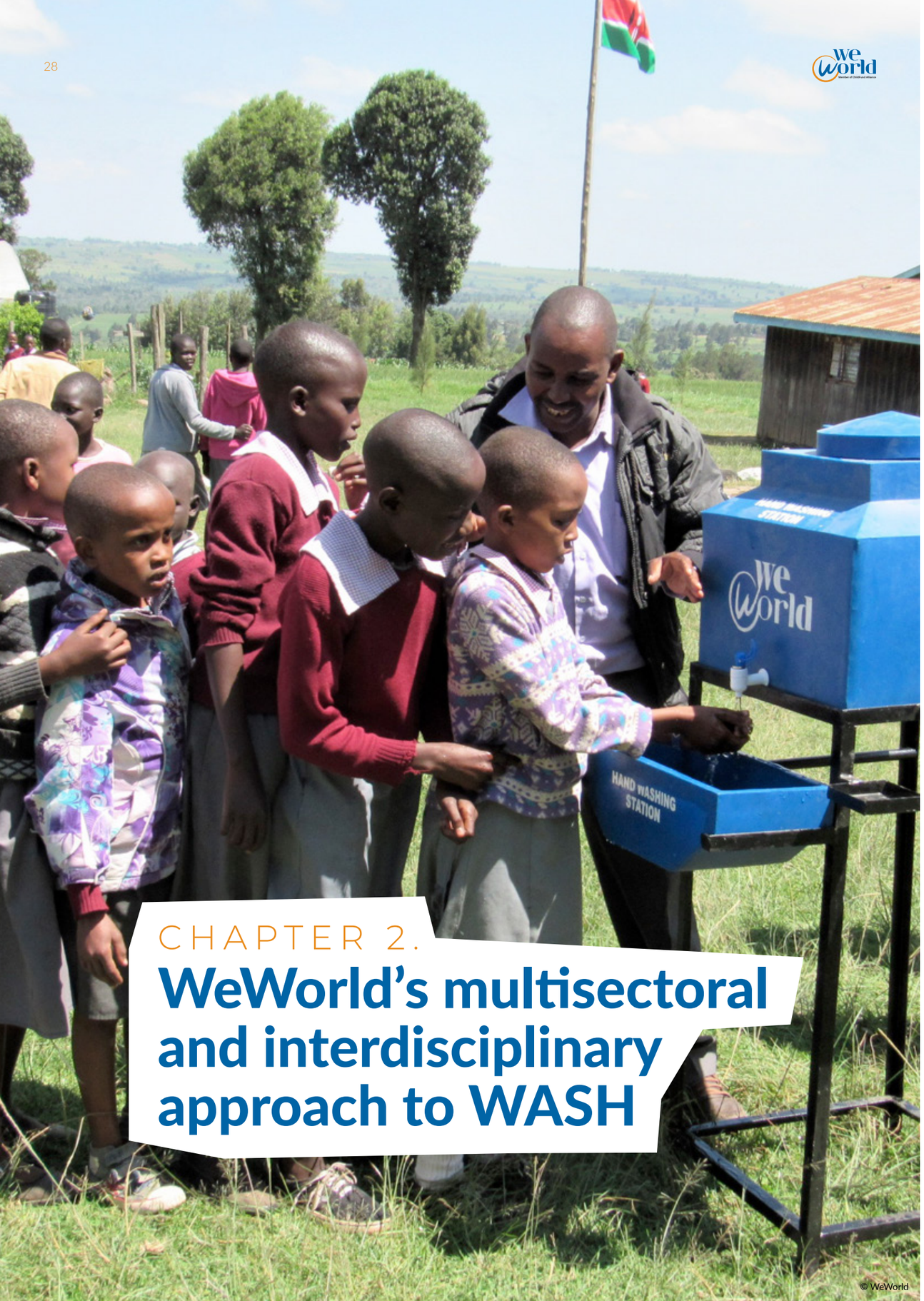
23 Adopting this perspective means implementing interventions that bring together emergency and sustainability with a long-term vision and commitment. For our work to have a lasting impact, the sustainability of projects must be integrated into their design on a social, economic, and environmental level. This implies overcoming the limits of the relief-rehabilitation-development paradigm, strongly focused on the immediate response to emergencies and crises and promoting and strengthening the resilience of communities and the construction of sustainable and shared governance so that, once the crisis is re-presented, they are ready to react.

WEWORLD'S THEORY OF CHANGE

WeWorld's approach is transformative in nature. For this reason, our organisation has designed a Theory of Change (ToC) for the numerous areas of intervention in which we operate, including, of course, WASH.
At the core of our Theory of Change are 3 strategic focus:

- → **COMMUNITY (INDIVIDUALS AND THEIR COMMUNITIES):** we emphasize the role of the individual within his or her community and we work towards the development of positive communities that value the individual and their individual and collective rights and capabilities.
- → **VULNERABILITY (INEQUALITIES AND VULNERABLE INDIVIDUALS):** we give particular attention to the most vulnerable individuals, emphasizing the fight against inequalities and for fair access, on top of providing basic services and urgent needs.
- → **GOVERNANCE AND LOCALIZATION:** we reinforce (not replace) local and national systems, from a bottom-up perspective, which values endogenous resources and capabilities.





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CHAPTER 2.

WeWorld's multisectoral and interdisciplinary approach to WASH

2.1. HOW WE DO WASH

As is increasingly clear, the WASH sector has a direct or indirect impact on all aspects of life. Despite considerable progress in recent decades in guaranteeing access to adequate water, sanitation, and hygiene, far too many people continue to be denied these rights. **Emerging challenges, such as the COVID-19 pandemic, the escalation of protracted conflicts and the emergence of new war scenarios, the increasingly devastating and frequent effects of climate change, the indiscriminate exploitation of natural resources, and the widening of inequalities that push more and more people to the margins, are all factors that require us to change the way we look at problems and work to find effective and long-lasting solutions.**

WeWorld has developed a multisectoral and interdisciplinary strategy and set of skills to meet old and new challenges and ensure that everyone has universal access to safely managed WASH services. We have been working in very diverse countries throughout the world for more than 50 years to effectively realise Sustainable Development Goal 6 (SDG 6), which seeks to ensure the availability and sustainable management of WASH services, opening to a broader and more holistic perspective. **Indeed, it is required to go beyond the simple, albeit fundamental, creation of infrastructure and to intervene in a more comprehensive, inclusive, and all-encompassing manner.** Thus, two assumptions underpin WeWorld's intervention: **the importance of WASH services in all aspects of people's lives and the effective, deliberate, and long-term engagement of communities.** We created this Atlas specifically to describe our multisectoral and interdisciplinary approach and share experiences, best practices, lessons learned, and much more while always putting communities and their needs first, and with the desire to affirm once more how **WASH services are more than just taps and sanitation, but catalysts for a brighter, healthier, and more equitable future for all.**

To systematise our work in the WASH sector, we divided our interventions into 7 thematic insights that effectively encapsulate our multisectoral and interdisciplinary approach (see graph below).

WEWORLD'S MULTISECTORAL AND INTERDISCIPLINARY APPROACH TO WASH

These areas are the result of participatory discussion between different branches of the organisation: our WASH Global Thematic Expert, country representatives, WASH focal points (gathered in the WASH Community of Practice; see the dedicated box in this section), and the Study Centre.

Each thematic insight is founded on SDG targets and encompasses multiple related and overlapping topics, establishing a framework that focuses on achieving SDG 6 (WATER for All). Within the framework, the 7 thematic insights are not listed in order of significance but rather revolve around a shared goal.

We created this Atlas specifically to describe our multisectoral and interdisciplinary approach and share experiences, best practices, lessons learned, and much more while always putting communities and their needs first, and with the desire to affirm once more how WASH services are more than just taps and sanitation, but catalysts for a brighter, healthier, and more equitable future for all.

HOW TO READ THE FLOWING FUTURES ATLAS

THE 7 THEMATIC INSIGHTS: The next section of this chapter represents a sort of legend, a guide to reading this Atlas, focusing on the different aspects, often intersecting with each other, that make up each thematic insight. Continuing with the reading of the Atlas, each thematic insight is explored in depth, reporting data from accredited sources and WeWorld's field work, examples of good practices, and standardised working modalities that WeWorld has developed over the years to guarantee continuity, method, and sustainability of the interventions, always keeping in mind the need to adopt a context-specific approach. Each thematic insight is then presented again within the Atlas, specifically within the country factsheets in which WeWorld operates, using icons (see the graph of WeWorld's multisectoral and interdisciplinary approach to WASH).

THE 5 REGIONAL SECTIONS: As already underlined, one of the 4 pillars of WeWorld's global WASH strategy is the active involvement of the community, which cannot ignore an accurate analysis of the geographical, economic, social, and cultural context in which it is inserted. For this reason, the Atlas has been divided into regional sections that respond to the classification of the organisation's operational intervention regions: the Middle East, Africa, Latin America and the Caribbean, Eurasia, and the Global North.

THE COUNTRY FACTSHEETS: In the various regional sections, in addition to data and analyses from accredited secondary sources (FAO, WHO, UNICEF, etc.), there is room for almost all WeWorld's countries of intervention, to which we have dedicated country factsheets describing our multisectoral and interdisciplinary approach to WASH, from a perspective more oriented to the programme (and, therefore, projected over the long term and anchored to the history of the country and the community) than to individual projects. **The intent is to retrace what has been done in the WASH field in the years of implementation of the WASH Global Strategy (2020-2023), reporting data directly collected by the organisation, results achieved, testimonials, lessons learned, and future prospects**. Given the complexity and overlap of needs existing in these contexts, especially in light of the old and new challenges we find ourselves dealing with, there is no country in which we operate that requires a single, specific, and sectoral intervention, in particular, when talking about WASH. **Working to guarantee universal access to adequate WASH services means, to a different extent depending on the context, working to guarantee the right to food, health, dignity, privacy, information, protection from wars and conflicts, childhood, education, gender equality, living in a healthy environment, sustainability, etc**. For this reason, each country factsheet is associated with multiple icons referring to the 7 thematic insights: **the more transversal the intervention in the country, the more thematic insights are involved.**

THE VOICE OF

Anna Crescenti,

WASH Global Expert for WeWorld

Anna Crescenti, WASH engineer since 2002 and WeWorld's WASH Global Expert since 2020, discusses how the organisation has equipped itself with standardised working methods to ensure continuity and coherence of interventions in different contexts, as well as the exchange and sharing of good practices made possible by the WASH Community of Practice.

"The concept of developing shared working modalities emerged because, despite the fact that we had been intervening in the field for many years in various areas applied to WASH with satisfactory results, a common way of working was still missing. Yet, common does not mean equal. In truth, we did not want to create guidelines that essentially resulted in a copy and paste of good practices, neglecting the variety of contexts in which people live, but rather a working approach based on clear and common standards to ensure the same to everyone: safe and equitable access to WASH services.

WASH in Schools was the first modality we turned into a paper. The connection between the WASH and education sectors has always been obvious to us, and it is a crucial, almost historical, component of our organization's work. However, we discovered that these two areas operated in tandem, almost as if they were on distinct rails that never crossed. It was instead required to devise an intersectoral strategy.

As a result, we developed principles and guidelines to structure our intervention. In terms of connections between the WASH area and education, the most evident requirement was to integrate the "software" component of education, defined as transmitted and learned abilities, with the "hardware" component, i.e., the creation of adequate and inclusive WASH structures in schools. However, not all countries active in the field of education had personnel experts in WASH. As a result, we were compelled to develop principles that were accessible to everyone, because the foundation had to be universal.

A similar method was used to develop the Menstrual Hygiene Management modality (MHM) and the WASH in Health guidelines in Palestine, which we plan to transform into a worldwide modality soon. We are presently working to establish alternative mechanisms, beginning with countries that have previously intervened successfully, capitalising on excellent practices while emphasising the importance of continually adapting them to diverse circumstances. In the end, developing a modality requires extensive internal activation, monitoring, and knowledge management. The examples are all around us; we just need to analyse them and engage in a constructive and participatory conversation on multiple fronts.

WeWorld's WASH Community of Practice developed from this conversation. It is a space equipped with an online chat and a mailing list to encourage knowledge sharing, dialogue, and coordination between focal points and WASH staff in the regions where WeWorld is active in the sector, as well as to improve the skills of other staff who are not directly involved in WASH programmes. As a result, the WASH Community of Practice serves as both a tool and a platform. A tool because it provides for the dissemination and review of best practices as well as creative ideas and methods connected to WASH that have been implemented in various countries, allowing the organisation to capitalise on and promote what has been done in the sector.

A platform in the sense that it provides a space for WASH focal points and staff to promote their experience, tools, and methods used in the countries, solicit help from other colleagues based on their experiences, and exchange papers, tools, and so on.

The WASH community meets periodically in topic sessions led by members from different countries, making it an e-learning opportunity. The basic concept is that WeWorld's WASH staff are active protagonists, participating in and contributing to the organisation's WASH sector progress and improvement."

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WASH and HEALTH

Adequate and safe drinking water and sanitation are critical to health, as both help prevent and minimise illness onset and transmission and overall contribute to individual and community well-being and dignity. Especially at healthcare facility and community level, inadequate WASH services and infrastructures and poor hygiene practices can facilitate the spread of infections as well as antimicrobial resistance; and untreated waste contaminates aquifers and surface water used for drinking water, irrigation, bathing, and household usage.

Fully functioning WASH services are a crucial aspect of **preventing infections, reducing anti-microbial resistance, ending preventable maternal and newborn deaths, and responding to outbreaks and emergencies**. According to WHO, improved access to WASH services might save at least 1.4 million lives per year (WHO, 2023c).

Furthermore, having functioning WASH services in healthcare facilities helps to increase trust and demand for services among patients and communities in the relevant catchment area. Moreover, there is a strong association between the availability of safe drinking water and fully functional WASH services at the facility level with the improvement of care perception among users, increased staff motivation and loyalty, reduced costs, and improved overall service efficiency, all of which positively impact on health and people's lives.

In 2021, globally **more than 1 healthcare facility out of 5** (22%) did not have **basic water services**

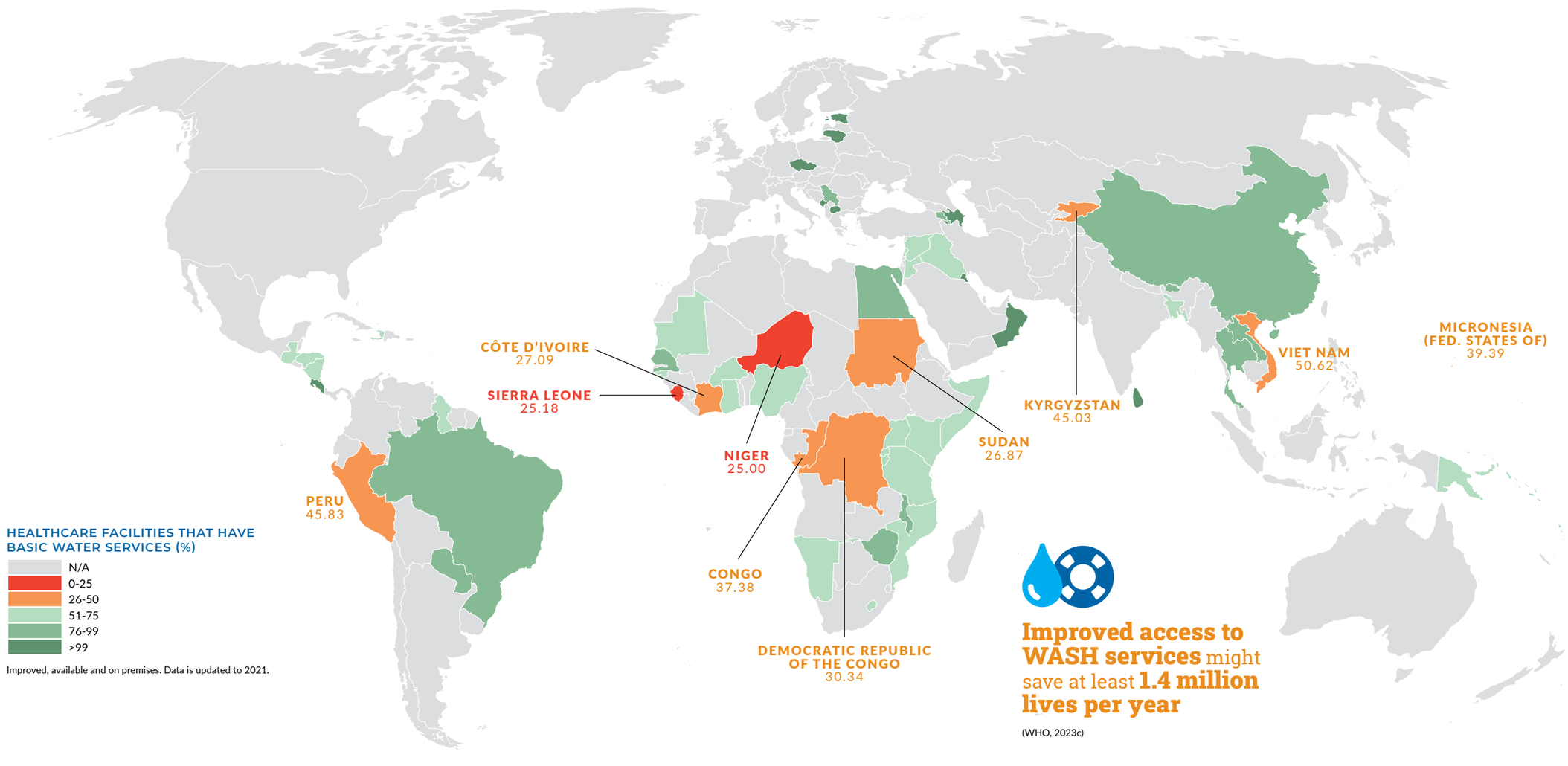
(WHO/UNICEF, 2023)

KEY FACTS ABOUT WASH AND HEALTH

- Water, sanitation, and hygiene are critical components of health and development. Microbiologically contaminated drinking water can transmit diseases such as diarrhoea, cholera, dysentery ans typhoid. Infections caused by contaminated water or inadequate cleanliness pose a major threat to people's health, particularly children.
- Globally, 1.5 billion people still lack adequate sanitation (WHO, 2023b). This deficiency is responsible for about 90% of cases of diarrhoea, which is the second leading cause of mortality in children under five (Manetu et al., 2021).
- Diarrhoea is a leading killer of children, accounting for approximately 9% of all deaths among children under five worldwide in 2021. This translates to over 1,200 young children dying each day (UNICEF, 2024a).
- WeWorld works in the most vulnerable areas, improving WASH services both at household level and in healthcare facilities, and to strengthen the community resilience by promoting uptake of optimal hygiene and nutrition related practices especially among the most vulnerable groups, namely children under five and pregnant and lactating women.

HEALTHCARE FACILITIES THAT HAVE BASIC WATER SERVICES (%)

Source: WHO/UNICEF, 2023

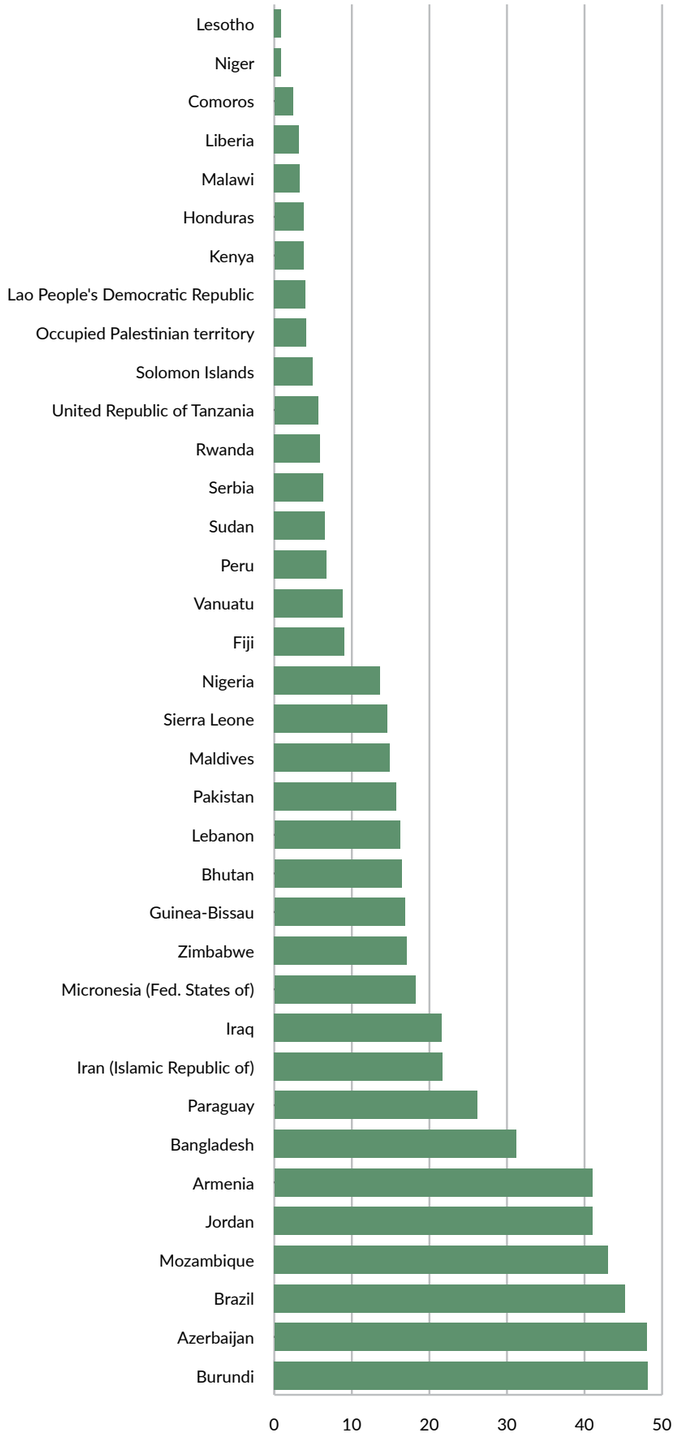


Improved access to WASH services might save at least **1.4 million lives per year**

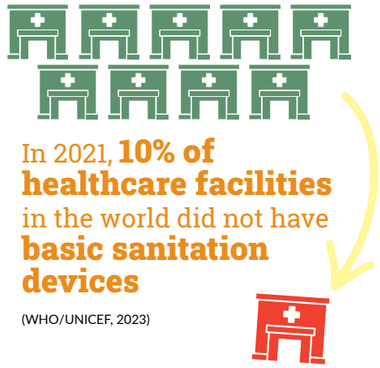
(WHO, 2023c)

HEALTHCARE FACILITIES THAT HAVE AT LEAST BASIC SANITATION SERVICES (%)

Improved, usable, dedicated for staff, sex-separated with menstrual hygiene facilities, and adapted for limited mobility. Only countries scoring below 50 are reported. Data is updated to 2021. Source: WHO/UNICEF, 2023.



In 2021, 49% of healthcare facilities[24] did not have functional hand hygiene facilities, and 22% did not have a basic water service, i.e., internal water treatment infrastructure. In high-income countries, 7% of patients admitted to hospitals were at risk of developing one or more hospital-acquired infections[25], while the rate is more than double (15%) in low- and middle-income countries. Furthermore, due to poor management of medical waste, 2 million healthcare workers per year risk infection from needlestick injuries (WHO/UNICEF, 2022).

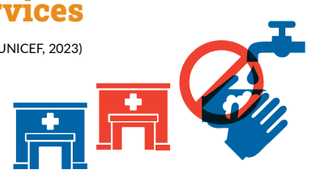


In 2021, **10% of healthcare facilities** in the world did not have **basic sanitation devices**

(WHO/UNICEF, 2023)

In 2021, globally almost **1 healthcare facility out of 2** (49%) did not have **basic hygiene services**

(WHO/UNICEF, 2023)

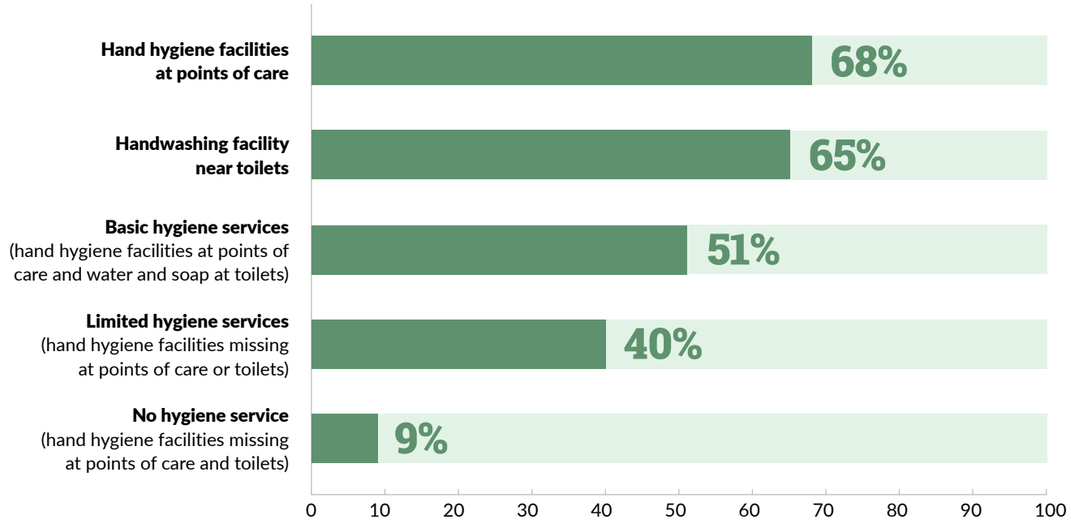


24 In 2021, only 78 countries had national estimates for at least one indicator (water, sanitation, waste management, and environmental cleanliness) of basic WASH services.

25 Hospital-acquired or nosocomial infections refer to any infection contracted by a patient or employee due to staying or working in a hospital environment.

HEALTHCARE FACILITIES WITH HYGIENE SERVICES WORLDWIDE (%)

Data is updated to 2021. Source: WHO/UNICEF, 2023



WASH STANDARDS FOR HEALTHCARE FACILITIES

In 2008, in order to address issues related to WASH services in healthcare facilities, the World Health Organisation (WHO) published the "Essential Standards of Environmental Health in Healthcare" (WHO, 2008). Subsequently, UNICEF and WHO, with several partners, launched the Joint Monitoring Programme (JMP), through which they produce regular updates on WASH globally. The first JMP report on WASH in health facilities introduced definitions and indicators that contribute to the achievement of the 2030 Sustainable Development Goals (SDGs), in particular, universal access to water and sanitation (SDGs 6.1 and 6.2) and universal health coverage (SDG 3.8).

BASIC LEVELS OF WASH SERVICES IN HEALTH FACILITIES, AS DEFINED BY WHO/UNICEF JMP (2019)

WATER	SANITATION	HYGIENE	WASTE MANAGEMENT
Water is available from an improved source on the premises.	Improved sanitation facilities are usable, 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.	Functional hand hygiene facilities (with water and soap and/ or alcohol-based hand rub) are available at points of care, and within five metres of toilets.	Waste is safely segregated into at least three bins, and sharps and infectious waste are treated and disposed of safely.

WEWORLD'S GUIDELINES FOR HEALTHCARE FACILITIES

In 2022, WeWorld developed the "**National Standards for WASH in Healthcare Facilities, State of Palestine,**" which are guidelines on the medical requirements for water, sanitation, and waste management in various levels of healthcare facilities (hospitals, clinics, and mobile clinics). Furthermore, WeWorld acts as the leader of the WASH in Health subgroup (a thematic subgroup of the WASH Cluster and Health Cluster) in Palestine to oversee protocol implementation and promote the adoption of best practices.
The WASH standards serve as a general reference and a practical tool for the Ministry of Health and the organisations and individuals in charge of managing, implementing, and using WASH services in healthcare facilities. Furthermore, the strategy adopted adopts an inclusive, attentive, and sensitive perspective on the groups that most face inequities in health and access to services, such as women, children, and persons with disabilities, at all stages.

BASIC STANDARD LEVEL INDICATORS FOR WASH INFRASTRUCTURE IN HEALTHCARE FACILITIES

WATER SUPPLY

GUIDELINE 1 – **WATER ACCESS**
Sufficient water source and water collection points are available to allow convenient access to fresh water for medical interventions, infection control activities, drinking, hygiene, laundry and cleaning.

GUIDELINE 2 – **WATER QUALITY**
Water for drinking, cooking, personal hygiene, medical activities and laundry is safe for the purpose intended.

GUIDELINE 3 – **WATER QUANTITY**
Sufficient water quantity is available at all times for drinking, infection prevention and control, medial activities, cleaning, laundry, hygiene, and food preparation services.

SANITATION

GUIDELINE 4 – **TOILETS AND EXCRETA DISPOSAL**
Sufficient numbers of adequate, accessible, safe and gender-sensitive toilets are provided for patients, staff and caregivers.

GUIDELINE 5 – **WASTEWATER DISPOSAL**
Waster is disposed of rapidly and safely.

HYGIENE

GUIDELINE 6 – **HANDWASHING**
Sufficient functional handwashing facilities are available in healthcare facilities.

HEALTHCARE WASTE MANAGEMENT

GUIDELINE 7 – **HEALTHCARE WASTE MANAGEMENT**
Healthcare waste is segregated, collected, transported, treated and disposed of safely.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FOOD STORAGE AND PREPARATION

GUIDELINE 8 – **FOOD STORAGE AND PREPARATION**
Food for patients, staff and carers is prepared and stored in a way that minimizes the risk of disease transmission.

MANAGEMENT

GUIDELINE 9 – **MANAGEMENT OF WASH SERVICE IN HCFs**
Adequate measure and resources are in place to ensure quality and sustainable WASH services to Healthcare Facilities (HFCs).

The guidelines and minimum requirements aim to:

- → Support the Ministry of Health and health workers to maintain the safety, quality, and dignity of the population by ensuring access to adequate, efficient, and gender-sensitive WASH services. Ensure that WASH services in healthcare facilities provide a basic minimum standard for the provision of quality care.
- → Encourage patients and visitors to visit healthcare facilities and learn and practice positive hygiene behaviours.
- → Strengthen sanitation and infection prevention and control (IPC) to ensure lower infection rates.
- → Provide a framework for developing, monitoring, and implementing safe and adequate WASH services.

These principles, although focusing on the Palestinian context, serve as the compass for WeWorld's WASH efforts in the healthcare sector. Starting from this positive experience[26], **WeWorld is designing an overall modality, which will then be adapted according to a context-specific approach**.

26 For further information on our interventions in Palestine, see page page 86.

INFECTION PREVENTION AND CONTROL (IPC)

Infection prevention and control (IPC) is a practical, evidence-based approach preventing patients and health workers from being harmed by avoidable infections. Moreover, it requires constant action at all levels of the health system, including policymakers, facility managers, health workers and those who access health services. IPC is unique in the field of patient safety and quality of care, as it is universally relevant to every health worker and patient, at every healthcare interaction. **Defective IPC causes harm and can kill.** Without effective IPC it is impossible to achieve quality healthcare delivery and is crucial within the context of epidemics control.

Infection prevention and control affects all aspects of healthcare, including hand hygiene, surgical site infections, injection safety, antimicrobial resistance and how hospitals operate during and outside of emergencies. Programmes to support IPC are particularly important in low- and middle-income countries, where healthcare delivery and medical hygiene standards may be negatively affected by secondary infections. The IPC includes actions such as the construction and rehabilitation of sanitation services and the definition of protocols for the control of infections at health facility and community level.

In most of the countries where we work, WeWorld procures supplies for infection prevention and control, installs handwashing stations and distributes hygiene kits, activates IPC protocols, strengthens solid waste management in healthcare facilities, and finally, builds capacities at all levels of the healthcare system (government, institutions and services providers in the health and education sector and communities), on infection prevention and control protocols and practices. This is especially the case, for example, in Haiti and Mozambique, where polluted water and open-defecation habits continue to be a problem.

In Haiti[27], for instance, WeWorld implemented hygiene awareness initiatives to discourage open defecation. As a result, communities have taken the lead in building and restoring latrines, installing handwashing stations, and have adopted optimal hygiene practices.

In Mozambique[28], WeWorld has worked to strengthen the Cholera Treatment Centre's (CTC) response capacity and contain the spread of the disease by distributing hygiene kits to patients' families and implementing awareness campaigns that included the creation of artistic materials for dissemination on cholera prevention measures, the involvement of radio programmes, and door-to-door visits.

27 For further information on our interventions in Haiti, see page page 143.

28 For further information on our interventions in Mozambique, see page page 123.

COVID-19 EFFECT

The WASH sector has also played a significant role in the COVID-19 pandemic's prevention and control. The virus can spread from an infected person's mouth or nose in small liquid particles when they cough, sneeze, speak, sing or breathe.

In this respect, handwashing with soap and water, as well as cleaning surfaces, are critical in controlling the outbreak. This means that having access to safe drinking water and sufficient sanitation is crucial in this respect. **WeWorld developed a guide to implement WAS interventions as a means to effectively respond to and address the pandemic, which is centred on ensuring that all recipients have access to clean water in sufficient quantities, soap or alcohol-based sanitiser, proper waste disposal, and accurate information.**
Furthermore, special emphasis was placed on WASH service standards in healthcare facilities and IPC protocols, which include essential guidelines for healthcare personnel and patients, such as constant hand cleaning with soap or alcohol and soap alcohol for all handwashing stations. At community level, in order to prevent transmission of the virus and mitigate risks, WeWorld implemented awareness raising campaigns promoting the adoption of optimal hygiene practices and ways to prevent the spreading of the disease.

THE IMPORTANCE OF ADEQUATE WASH SERVICES FOR NUTRITION

Water-related morbidity disproportionately affects children under five and is closely linked with malnutrition in all of its forms. In 2022, approximately 148.1 million (22.3%) of children under five were stunted[29], and 45 million (6.8%) were suffering from acute malnutrition (FAO, 2023a), a condition that causes between 1 and 2 million fatalities per year (Kassaw et al., 2021).
The availability of drinking water and sanitation services is closely related to food security and nutrition, both in terms of food availability, access, and consumption and the incidence of diseases, caused by contaminated water, which in turn can exacerbate cases of malnutrition.
Food in fact can easily become contaminated by exposure to contaminated water, pathogens on hands, and uncleaned surfaces, for example, due to scarcity and/or lack of potable water, adequate sanitation, coupled with sub optimal hygiene practices, increase thus risk of diarrhoea, waterborne intestinal diseases, and contribute to malnutrition.

Basic hygiene measures, on the other hand, such as handwashing with soap, can lower the incidence of diarrhoeal infections by roughly 39% on average (Solomon et al., 2021). Furthermore, washing at critical periods, such as before making a meal or feeding a kid, along with the use of safe drinking water to clean utensils and prepare food, lowers food contamination by 96% (WASH Advocates, 2013).
In the countries of operation, WeWorld works alongside national and local governments to fight malnutrition by supporting WASH in health interventions and by promoting optimal nutritional and hygiene practices. In Kenya, for example, we renovated water storage infrastructure and organised training sessions to support[30]. In Burundi, we rehabilitated sanitation facilities in medical and nutrition centres to ensure excellent care and combat malnutrition[31].

29 Poor nutrition, frequent illnesses and insufficient psychological stimulation all contribute to stunted growth and development. This disorder affects children whose height is more than two standard deviations below the median of the WHO child growth guidelines (WHO, 2015).

30 For further information on our interventions in Kenya, see page page 114.

31 For further information on our interventions in Burundi, see page page 111.

WASH and INCLUSION

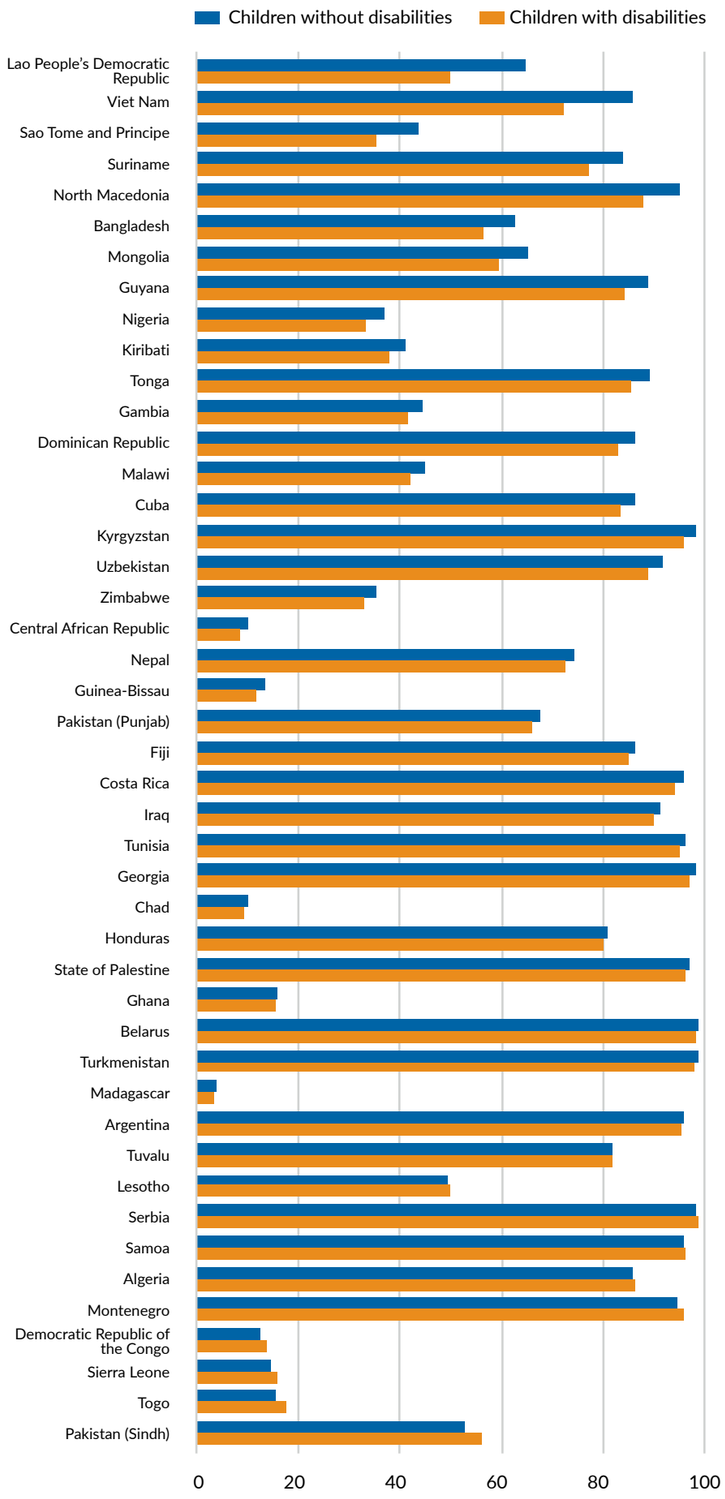
KEY FACTS ABOUT WASH AND INCLUSION

- In 2022, more than 1 billion people in rural areas did not have access to water and basic sanitation facilities in their homes (WHO/UNICEF, 2023).
- People living in vulnerable situations are twice as likely to lack access to safe, drinking water (WHO/UNICEF, 2023).
- Following the "leave no one behind" principle, WeWorld intervenes on behalf of people on the margins, whose needs are frequently disregarded, and fosters community empowerment by ensuring access to WASH services for every member of the community.

Strong inequalities remain between countries and within them in terms of access to water and quality sanitation services: wealthy individuals and people living in poverty, inhabitants of urban and rural regions, disadvantaged groups, and the rest of the population. **As a result, reducing inequalities and ensuring universal access to quality WASH services requires a variety of transformative actions in the economic, social, and political fields, both at the global and national levels, that address the underlying causes of inequalities: socioeconomic status, geographical origin, age, ethnicity, gender, religious orientation, disability conditions, and so on** (WaterAid, 2019).

CHILDREN THAT HAVE ACCESS TO SANITATION FACILITIES ON PREMISES (%)

Data is updated to 2022. Source: UNICEF 2023.



BRINGING THE MARGINS TO THE CENTRE

Safe drinking water and adequate sanitation and hygiene services are essential in all aspects of life and for all people, in times of stability and crisis, in emergency and humanitarian situations, and in urban and remote areas. **To concretely ensure access, however, the specificities of each instance must be evaluated from an intersectional viewpoint** (see the box in Chapter 1).

Our WASH interventions aim to ensure universal access to water and safely managed sanitation and hygiene services, beginning with an analysis of the needs of the most vulnerable and marginalised social groups (due to income, gender, age, race, ethnicity, migratory status, disability, and geographical location), encouraging their participation, and promoting their rights. **This is why we intervene in the most remote and inaccessible areas, as well as in disadvantaged urban neighbourhoods, paying attention to the most vulnerable members of the community, who are frequently relegated to the margins, on the geographical and social peripheries, and thus more susceptible to being left behind.** Thus, our goal is to contribute to the progressive elimination of inequalities, combat prejudice and ensure complete equitable access to WASH services, as well as participation in societal decision-making processes.

Categories most vulnerable to cumulative discrimination are also more likely to suffer disproportionately from the consequences of a lack of access to safe, potable water and poor-quality sanitation services (WHO, 2023d).

People living in marginalised contexts or poverty, for example, are more likely to have to rely on contaminated water sources or low-quality sanitation services, which can harm their health conditions while failing to provide the necessary means to remedy them and exacerbating poverty. The effects on health might vary based on location. In 2023, WASH-related disorders (diarrhoea, acute respiratory infections, malnutrition, and intestinal parasitosis) accounted for 89% of fatalities in poor and low-middle-income countries[32] (ibid.).

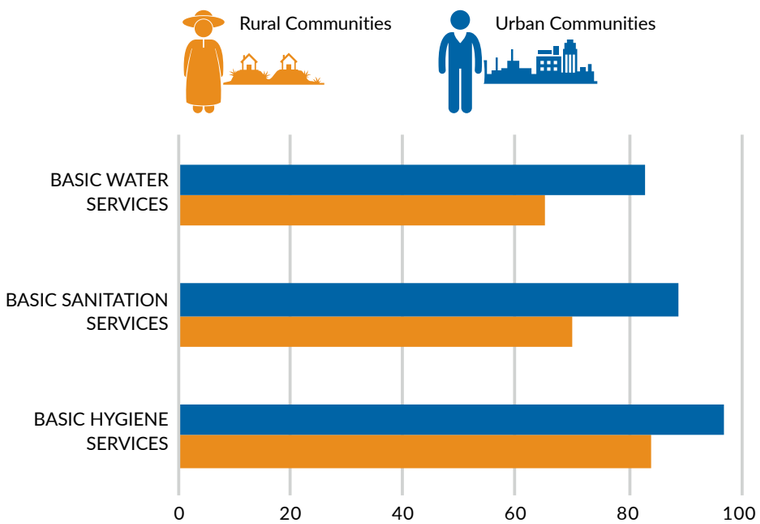
Inequalities in access to WASH services are recorded not only between different countries and geographical areas but also at the national and local level, especially in the contrast between urban and rural areas.

> Safe drinking water and adequate sanitation and hygiene services are essential in all aspects of life and for all people, in times of stability and crisis, in emergency and humanitarian situations, and in urban and remote areas.

32 According to the classification adopted by the World Bank, the economies of countries are divided into four categories (low-income, lower-middle income, upper-middle income, and high-income) depending on the gross national income (GNI) per capita, based on a reference threshold updated annually. Currently, and until July 2024, if GNI per capita is less than $1,135, the country is low-income; between $1,136 and $4,465 for low-to-moderate income; between $4,466 and $13,845 for upper-middle income; and over $13,846 for upper-middle income. For more information, see https://blogs.worldbank.org/opendata/new-world-bank-group-country-classifications-income-level-fy24.

GLOBAL POPULATION THAT HAS ACCESS TO BASIC WASH SERVICES (%)

Data is updated to 2022. Source: WHO/UNICEF, 2023.



Inadequate WASH services killed 270,000 people in low-income countries, **975,000** in lower-middle-income countries, and **112,000** in upper-middle-income countries in 2022

(WHO, 2023d)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Today, metropolitan regions house 55% of the world's population, and by 2050, this figure might rise to 68% (UN Habitat, 2022). However, urban planning is unable to keep up with the constant growth in the number of its residents, and infrastructure, particularly in low and middle income countries, is unable to guarantee safe water and sanitation for most citizens, contributing to the risk of worsening health conditions and wastewater pollution (UN Water, 2023b). Furthermore, the conditions of the most disadvantaged neighbourhoods, where these structures do not exist or are ineffective, pose a risk factor for public health, capable of causing epidemics that, while affecting and residing in the poorest communities first, can spread far beyond the city (ibid.).

Rural and decentralised areas face additional challenges in providing quality drinking water and sanitation services, such as environmental fragility (being more vulnerable to climate stress while also being less resilient and equipped to respond to it) and social, cultural, and economic models that differ from urban ones (UNESCO, 2023)[33].

In many cases, rural settlements are based on an agri-food economy and limited water resources; in fact, the majority of existing water infrastructure is provided by low level decentralised systems (community water collection points, public kiosks, spring catchment, water basins, etc.[34]), which frequently record high levels of inefficiency due to technical, managerial, or financial deficiencies, forcing the rural population to rely on local unprotected water sources, such as wells, springs or rivers, which often are contaminated. **Inhabitants of rural areas are also facing conflicts related to accessibility to these limited resources and are then overexposed to food insecurity: a lower amount of accessible water leads to a smaller number of cultivable agricultural products and, as a result, a higher risk of malnutrition, particularly for children** (FAO, 2023b).

33 Ethnic, religious, cultural, and indigenous groups predominate in rural and peripheral locations. As a result, by the principle of non-discrimination, the provision of quality drinking water and sanitation services in these contexts should be culturally sensitive and take into consideration the unique characteristics of these communities.

34 Underground tanks (built of reinforced concrete, plastic, fibreglass, steel, or another material) used for wastewater treatment in locations without a public sewage system.

GOOD PRACTICES FOR PROTECTING THE MOST VULNERABLE PEOPLE AND COMMUNITIES: THE WASH AND CASH MODALITY

WeWorld uses Cash and Voucher Assistance (CVA) as a tool to support the most vulnerable communities, whether in emergency contexts or long-term development interventions, to achieve sectoral outcomes (e.g., food security, WASH or education) or in response to basic needs through Multi-purpose Cash Assistance (MPCA). The CVA approach and the methodologies in use in the countries where WeWorld operates are currently being standardised, and they will soon be formalised in a comprehensive document, as has already been done for other modalities derived from our Global WASH Strategy[35].

CVA is well suited in the WASH field to overcome economic barriers to access to safe water and quality sanitation services but also to access to hygiene items. Economic barriers should never constitute a barrier to access to water which, as a human right, should be guaranteed to everyone regardless of their income.

Although cash transfers cannot replace all traditional WASH activities, they help households financially and have been used to increase access to drinking water through water vendors or small shops or through water treatment and storing kits. In some cases, MPC assistance can help meet basic needs, including the supply of water and hygiene items or the payment of water bills. Cash for work has also been used to repair and recover piped water networks or construct public sanitation facilities. In line with WeWorld's people-centred approach, the CVA is optimised for recipients, particularly the most disadvantaged groups, enhancing their dignity and empowerment while strengthening local markets.

CVA modalities in the WASH context may consist of:

- → **Cash:** direct provision of money to recipients, either physically (cash-in-hand), digitally (e-cash) or through other withdrawal opportunities depending on the Financial Service Provider (FSP) used (cash over the counter, ATM, bank transfer, and others)
- → **Vouchers:** a paper or electronic coupon that can be redeemed for goods and/or services. Vouchers are either denominated as a cash value (e.g., USD 15) or as a set of pre-determined commodities or services (e.g., soap, shampoo, etc., or services for plumbers). They are redeemable with pre-selected vendors or service providers.

Concrete examples of CVA for WASH in our interventions included the distribution of:

- → Vouchers for purchasing water through water trucking services.
- → Vouchers and cash for purchasing kits and/or hygiene items or water purification systems (filters or disinfection products).
- → Vouchers for purchasing domestic hygiene services or products (for example, the purchase of the items and tools necessary to build a toilet at home).
- → Voucher for purchasing water service (for example, a technical assistance service, the rehabilitation of a domestic well, or the construction of the well itself).

ADVANTAGES AND DISADVANTAGES OF EMPLOYING CASH AND VOUCHER ASSISTANCE (CVA)

ADVANTAGES	DISADVANTAGES
• CVA can save time spent on the procurement of large quantities of supplies. • CVA can reduce requirements to manage logistics, warehousing, and coordination with suppliers. • CVA can enable shifts of focus from the sourcing and distribution of materials to technical support, good programming, and execution. • CVA can boost the local economy. Indeed, if undertaken appropriately, it can support and strengthen the local market and support economic recovery.	• The prices of the materials and services might be higher in the retail market compared to the prices offered by the suppliers when purchased in bulk. • CVA requires extra efforts to monitor the quality of materials and services sourced by the recipients. • If WASH practitioners are unfamiliar with cash, CVA specialist's support will be needed before implementation.

35 For further information, see the interventions in Burkina Faso and the Sahel (page 106) and Ukraine (page 162).

WASH and COMMUNITY RESILIENCE

INTERVENING IN EMERGENCY AND PROTRACTED CRISES WHILE KEEPING AN EYE ON THE FUTURE

WeWorld's interventions in the WASH sector are integrated into every phase of the project cycle in contexts of complex and/or protracted crises. For example, in Syria, Lebanon, and Palestine, where our response activities to regional conflicts are concentrated or in Latin American, where we work to mitigate the shocks caused by climate crises by responding promptly to food crises and seeking solutions that increase community resilience. **Given the increasing complexity of current international crises, which are characterised by disasters (natural and man-made) that have a profound impact on people's lives and dignity, WeWorld takes an integrated protection approach that identifies a variety of multisectoral actions with a dual purpose: on the one hand, achieving immediate results that meet the population's emergency needs; on the other, promoting empowerment and self-development.**

As a result, the interventions aim to lay the groundwork for long-term development by achieving long-term results using participatory tools and the strengthening of civil society to ensure sustainability. **This method is based on the central role of the communities and their engagement, which makes them both recipients and agents of endogenous change processes, i.e., one that begins with boosting community empowerment and skill development.**

FROM EMERGENCY TO DEVELOPMENT TO PEACE: THE TRIPLE NEXUS

The term "Triple Nexus" refers to the relationship between humanitarian aid, development, and peace. The idea is founded on the assumption that every action, especially in an emergency, must always establish the groundwork for generating autonomy for impacted groups and fostering prospects for future advancement, with the ultimate goal of achieving peace[37].

In emergency contexts, in compliance with the Triple Nexus, WeWorld's intervention is based on the following pillars[38]:

- → **LOCALISATION:** Local actors are involved, with the role of protagonists, in the strategies and intervention programmes, thus becoming responsible for their success.
- → **PROGRAMMATIC INVOLVEMENT:** The commitment and involvement of local actors are targeted because they are based on a programmatic approach that identifies and promotes the intervention of the local actor most suitable to carry it out.
- → **SHARED AND FLEXIBLE CONTEXT ANALYSIS:** The analysis of the intervention context is shared, also in terms of responsibility, between humanitarian and development actors, involves the community, and is integrated into the collection and monitoring of data (programme or project).
- → **FLEXIBLE ACTIVITY MANAGEMENT:** The activities are carried out and managed with a flexible programmatic approach (with the participation of the community and local actors and based on the resources of the community itself) and are constantly monitored to adapt to changes in context.
- → **DECISIONS MADE BY THE COMMUNITY ARE BASED ON COMPLETE INFORMATION:** Communities and individuals are placed in a position to make safe and informed decisions, thus promoting the achievement of results that can be considered truly collective.
- → **EMERGENCY EXIT STRATEGIES:** Each intervention strategy provides upstream "programmatic maps" of the transition from direct aid to exit from the emergency.
- → **SENSITIVITY TO THE DYNAMICS OF CONFLICT WITH A BOTTOM-UP APPROACH:** The creation of conditions favourable to future peace starts "from below", involving the community in identifying its needs, the causes of the conflict, the possible solutions, and any risks.

In July 2023 WeWorld[39] network, participated in a multistakeholder consultation that resulted in the Guidelines approved by the Italian Agency for Cooperation and Development (AICS) on the Triple Nexus[40]. The recommendations aim to improve the effectiveness of humanitarian interventions while providing the groundwork for impacted people to satisfy their own future needs; in other words, they seek to assure meaningful change based on community resilience.

37 The WEFE (Water, Energy, Food, Ecosystem) nexus is a more specific type of nexus followed by WeWorld in its WASH interventions, which involves the adoption of specific solutions at different levels, depending on the context, to achieve long-term economic, social, and environmental development. This link, in particular, emphasises the interdependence of water, energy, food security, and ecosystem conservation, and it identifies solutions based on existing synergies between water, energy, and agricultural policies (for more information on the WEFE link, see the following section "WASH and Climate").

38 For more information on WeWorld's application of the triple nexus, see https://reliefweb.int/report/world/weworld-gvc-principles-humanitarian-development-peace-nexus.

39 Link2007 is a network that brings together 16 of the most important and historic Italian non-governmental organizations. In addition to WeWorld, Amref, Cesvi, CIAI, CISP, COOPI, COSV, Elis, Fondazione Corti, ICU, Intersos, Le Réseau, LVIA, CUAMM-Medici con L'Africa, SoleTerre, and WorldFriends are members.

40 The guidelines are available at https://www.unipv.news/sites/magazine/files/2023-09/IMPAGINATO_Linee_guida_sul_nesso_tra_aiuto_umanitario_sviluppo_pace_UNICO-1-1.pdf.

KEY FACTS ABOUT WASH AND COMMUNITY-RESILIENCE

- → Water scarcity increases most rapidly in regions affected by internal instability, conflicts, and natural disasters (World Resource Institute, 2015)[36].
- → The global water crisis is primarily a governance crisis: poor resource management, institutional and structural inefficiencies, insufficient financial investments, and corruption negatively affect the performance of water services in many countries.
- → Interventions in the WASH sector must be designed from a long-term perspective; that is, infrastructure and services must be sustainable and provide the community with tools and skills that allow it to be prepared to manage any future crises and shocks, increasing its resilience.
- → At the same time, it is important to work towards building a shared sense of citizenship in the management, maintenance and protection of water resources and services, including compliance with user payments. Good governance is achieved on various levels, not only by institutions or service providers. It is also important to consider the responsibility that the end user must bear. Whoever receives the water service must understand how the water supply and distribution cycle works, as well as how it is through end-user payment that service sustainability is guaranteed.
- → WeWorld provides humanitarian aid in emergency contexts, guaranteeing prompt and effective responses to the affected populations and simultaneously creating the most favourable conditions for their future autonomous development by collaborating with communities, local stakeholders and service providers, and international actors, including research centres and universities to enhance innovation in our WASH interventions.

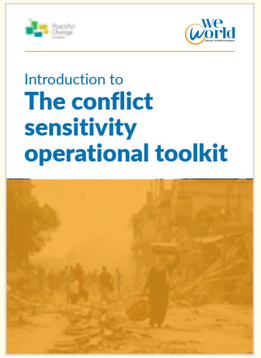
36 Of the 17 countries most affected by water scarcity, 12 are in the Middle East and North Africa, regions hit hard by the effects of climate change with rapidly growing populations, relatively weak institutions, and a history of conflict between countries and abroad. inside them.

THE CONFLICT SENSITIVITY OPERATIONAL TOOLKIT

The Triple Nexus has led to the recognition of the importance of a "bottom-up" strategy in carrying out any action aimed at restoring stability, beginning with an evaluation of community dynamics and taking into consideration the intervention context. To avoid delegitimising affected communities, which must play a central role in building their future resilience, in 2022 **WeWorld adopted the "Conflict Sensitivity Toolkit: a manual that aims to guide operators in emergency contexts to maximise the efficiency of actions taken in situations of conflict or internal fragility, to restore peace**[41].

The main purpose is to provide the tools for a systematic strategy capable of creating optimal conditions for conflict avoidance and resolution. These tools, which must be integrated at every decision-making level and throughout the life cycle of the programme or project, are based on an understanding of the interactions between the assistance provided and the dynamics of peace or instability; **in other words, the assistance can impact (positively or negatively, intentionally or unintentionally) both the factors that triggered the conflict and those that can promote peace.**

Similar influences are recorded in cases where the intervention seeks to act directly on the dynamics of the conflict (as in peacebuilding operations[42]), cases where it seeks to respond to the consequences of the conflict (as in humanitarian interventions), and cases where it involves activities that appear unrelated to the conflict (for example, repairing or building WASH infrastructure or providing educational material in schools).



The systematic approach to conflict sensitivity strives to be a mode of operation integrated inside the organisation rather than a feature introduced into intervention planning from the outside.

Three actions must be implemented continuously to accomplish this:

1. **Constant monitoring and updating of the intervention context and internal conflict dynamics.**
2. **Monitoring and updating the impacts and interactions (both good and negative) between one's involvement and the setting itself.**
3. **Implementation of the intervention in line with the findings of the analysis and in such a manner that the danger of negative impacts is minimised while the prospects for restoring peace are maximised, by adjusting the activities to the context and its changes.**

41 The Toolkit is available at https://ejbn4fjvt9h.exactdn.com/uploads/2022/12/Conflict-Sensitivity-Toolkit.pdf .

42 Armed conflict resolution interventions that aim to establish sustainable peace and ensure the protection of human rights.

WASH GOVERNANCE

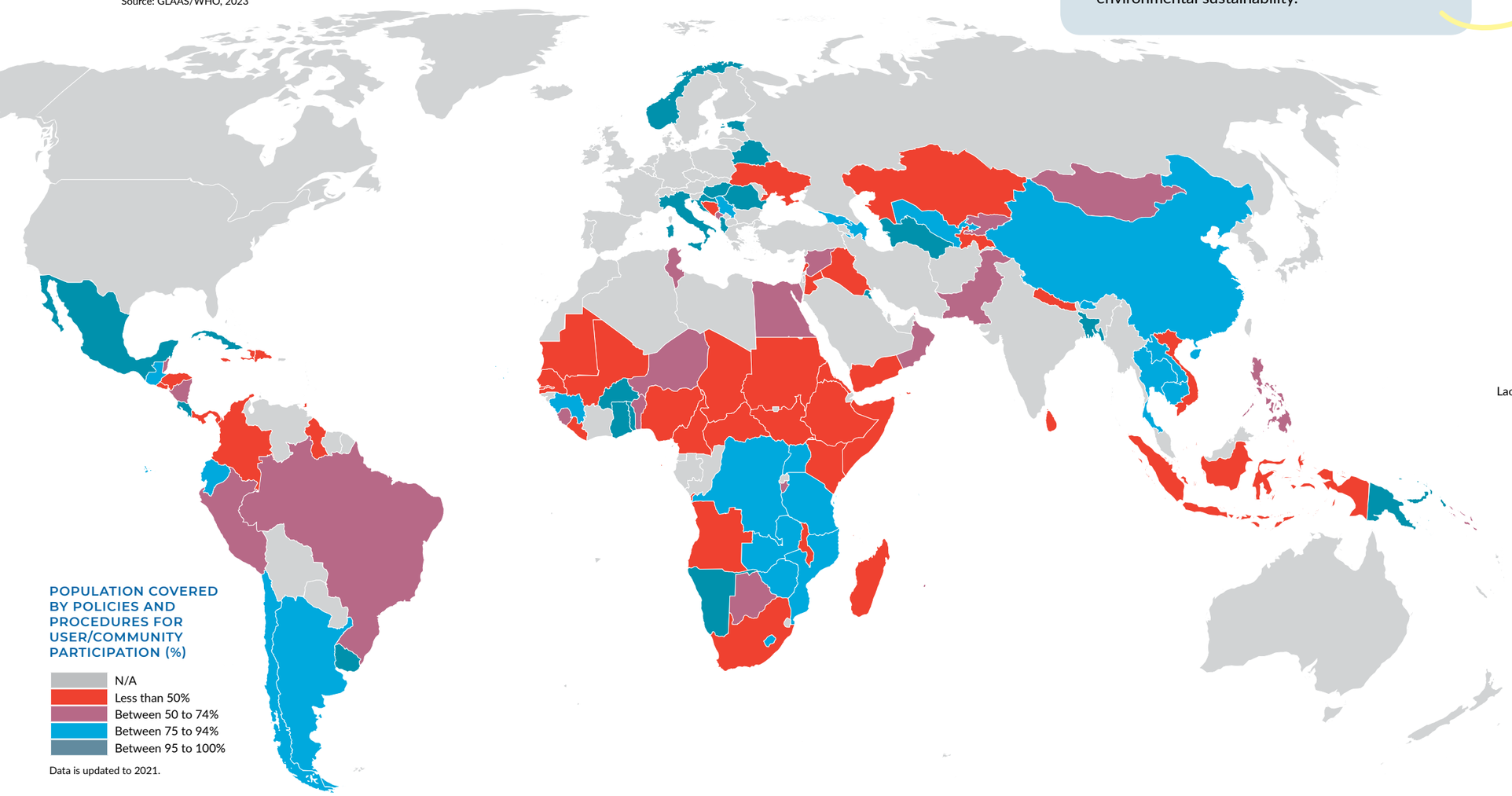
WASH governance refers to the set of economic, political, social, and administrative systems concerned with water usage and management. It consequently determines who supplies water, when and how, and who, on the other side, gets water services, when and how.

WASH services sustainability cannot be isolated from integrated, transparent, and participatory governance mechanisms that strive to include the community in ensuring the supply of WASH services to everyone.

In our WASH interventions, **we promote the strengthening of the capacities and responsibilities of institutions, local governments, and other subjects tasked with providing water and sanitation services, as well as the information accessibility of WASH services (i.e., greater awareness of decision-making processes) among citizens**. Inefficiencies and low technical competencies of institutions, which are not always capable of responding to the demands of all users or assuring an effective and sustainable service, can also generate limitations or exclusions in access to WASH services.

POPULATION COVERED BY POLICIES AND PROCEDURES FOR USER/COMMUNITY PARTICIPATION (%)

Source: GLAAS/WHO, 2023

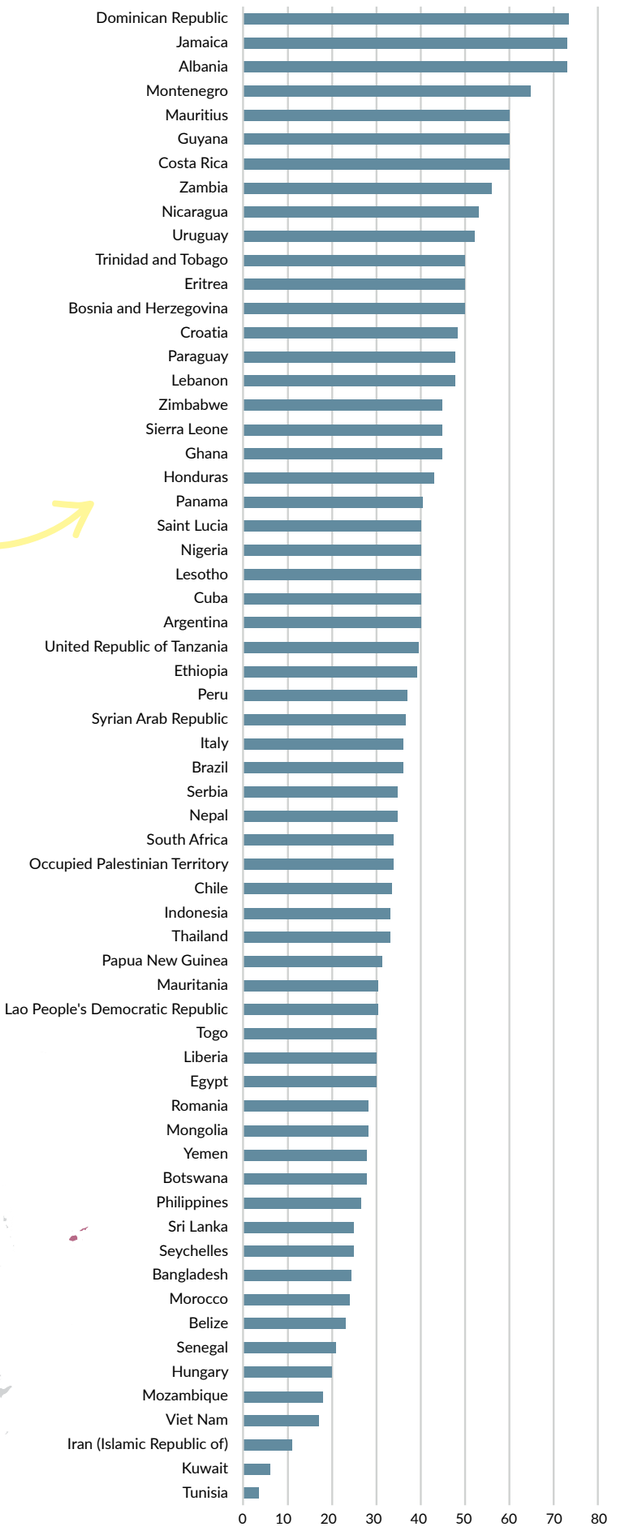


NON-REVENUE WATER

Non-revenue water (NRW) refers to water that is produced but then lost or unaccounted for. This means that NRW is the difference between the amount of water generated by a water utility or service provider for consumption or use and the amount of water paid to consumers, which places a financial and environmental burden on water utilities. Non-revenue water loss can be divided into two categories: real losses and apparent losses. Leaks, bursts, and other physical difficulties inside the distribution network create actual losses, although metre mistakes, unauthorised usage, and data handling errors frequently cause perceived losses. The cumulative impact of these losses not only strains the finances of water utilities but also exacerbates the difficulties of water scarcity and environmental sustainability.

NON-REVENUE WATER

National average for 3 largest suppliers. Data is updated to 2021. Source: GLAAS/WHO, 2023.



In this framework, **accountability[43] mechanisms must be ensured in two directions: on the one hand, through coordination between different levels of government and management, and, on the other, by enforcing the institutions' responsibilities to the population, communities, end-users and other stakeholders.** Enabling procedures for all actors participating in WASH services is thus a critical instrument for achieving meaningful change and guaranteeing the sustainability of interventions and community resilience without ignoring their engagement.

For example, in Lebanon[44], WeWorld has developed a multi-level participatory approach to improving local water governance to strengthen the availability, access, and quality of WASH services while also ensuring the service's reliability and sustainability and the manager's accountability.

Every activity must be carried out in collaboration with and within the community, creating opportunities for involvement and open dialogue. The empowerment process begins with active engagement in the planning and monitoring of water services, raising residents' awareness of the need to support service management operations. In this way, the people-centred approach improves democracy, amplifies the voices of disadvantaged socioeconomic groups, and fosters mutual trust among all parties concerned. For each intervention to be sustainable, **it is necessary to promote community ownership[45]** by activating forms of participation and modelling the actions to be undertaken based on the needs and resources of the specific context so that the activities' outcomes can become a shared heritage.

43 The term refers to a responsible and transparent use of power, which must be exercised to ensure the effectiveness and quality of the actions adopted and the protection and recognition of the human dignity of the community. Furthermore, accountability requires the creation of transparency mechanisms that can allow verification.

44 For further information on our interventions in Lebanon, see page page 82.

45 The term ownership refers to a change of perspective in the community with respect to the intervention carried out, no longer seen as something received but one's own, for which they assume commitments and responsibilities and which they want to guarantee stability over time.

The people-centred approach improves democracy, amplifies the voices of disadvantaged socioeconomic groups, and fosters mutual trust among all parties concerned.

THE COMMUNITY PROTECTION APPROACH (CPA): A GOOD PRACTICE OF INCLUSIVE PARTICIPATION IN WATER MANAGEMENT

The Community Protection Approach (CPA), tested for the first time in Palestine in 2013 and subsequently in other intervention countries, **is a tool that has made the management of WASH services more inclusive and participatory, thanks to the creation of valuable channels of discussion and dialogue with the most vulnerable social groups of the population[46].**

The CPA aspires to improve individuals' capacities to make informed decisions about their safety and reorganise their resources in designing local development plans that support safe and dignified living. The methodology used in emergencies enables us to overcome the logic of an intervention based solely on direct assistance, shifting from assisting to improving people's living conditions and involving communities in identifying vulnerabilities and risks to the promotion of their rights, including those to water and sanitation.

As part of WASH initiatives, its use enables us to begin a process of people's emancipation and equip the communities with the skills required to engage in local planning processes and WASH Clusters[47], expressing their needs.

46 Guatemala, El Salvador, Honduras, Colombia, Ecuador, Peru, Brazil, Bolivia, Nicaragua, Lebanon, Palestine, Libya, and Tunisia. For more information on the CPA, see https://cpainitiative.org/the-cpa/what-is-the-cpa/ and https://reliefweb.int/report/world/community-protection-approach-handbook.

47 The WASH Clusters are groups responsible for planning interventions in the WASH field, called to ensure that activities are coherent with each other, achieve common objectives, and guarantee the priority of the sectors in greatest need.

WASH and CLIMATE*

The climate crisis is a water crisis.

WeWorld, as stated in its mission and mandate, cannot ignore how the climate crisis profoundly affects our lives, particularly those of our recipients. **The climate crisis poses a serious threat to long-term development, potentially leading to wars over resources, famine, drought, and other natural disasters, as well as increased widespread poverty.** WeWorld recognises the importance of the environment as a shared resource that must be protected and defended, and through its programmes actively pursues the goals of the 2030 Agenda, including taking action to combat climate change and its consequences.

Climate change is the most pressing challenge of our time, affecting a growing number of countries. **The connection between these and the WASH sector is now clear. Indeed, the effects of climate change have a significant influence on access to natural resources, especially to water. The climate crisis is a water crisis.** Furthermore, rising temperatures and unpredictable weather patterns make access to clean water and proper sanitation increasingly infrequent, threatening worldwide public health.

Climate change is seriously threatening the availability of fresh water on Earth (0.5% of the total). Over the previous two decades, the storage of terrestrial water, including that in soil, snow, and ice, **has dropped at a pace of one centimetre per year, with severe implications for water security.** Furthermore, increasing sea levels threaten to extend water salinization and limit freshwater availability for individuals and ecosystems in coastal areas (UN, 2023). Climate change affects not only the amount but also the quality of water since rising water temperatures and increased frequency of floods and droughts exacerbate the danger of water contamination (ibid.). This can deprive communities of the opportunity to collect the amount of uncontaminated water required for handwashing and hygiene, as well as limit the operation of healthcare facilities, severely affecting community health, particularly that of the most vulnerable groups, such as women, children, and people with disabilities.

These effects may be seen all across the world; in fact, the climate crisis is a global catastrophe that affects everyone. To address it, global communities must increase their resilience so that they can foresee, prepare for, and respond to its challenges.

* As with other thematic insights, the section's title (in this case, WASH and Climate) serves as a container for a variety of issues. This section tackles not just the existing relationships between the WASH sector and climate change, but also issues of environmental and ecosystem protection and new ways for mitigating the impact of inefficient water services.

KEY FACTS ABOUT WASH AND CLIMATE

- → The effects of climate change (increased temperatures, increased and more frequent extreme weather events, etc.) reduce the availability of safe drinking water and instead amplify the risk of diseases caused by its contamination, threatening livelihoods, hygiene practices, and the health of communities. Moreover, scarcity of water resources results in higher costs of water that can cause inequalities in access.
- → Extreme weather, climate and water-related events caused 11,778 reported disasters between 1970 and 2021, with just over 2 million deaths and US$ 4.3 trillion in economic losses (WMO, 2023).
- → In 2018, 2 billion metric tonnes of municipal solid waste were created globally, with at least 33% of that trash not being managed in an ecologically sustainable manner (World Bank, 2018). All of this puts a burden on ecosystem conservation, which is critical for the preservation of biodiversity, water, air, and soil, and hence for the well-being of communities.
- → Climate change has a tremendous negative impact on WASH services. At the same time, the WASH sector presents a huge opportunity to contribute to global adaptation and mitigation goals, through the building of a climate-resilient, low-carbon WASH sector. WeWorld's interventions aim to build inclusive and resilient communities capable of mitigating and dealing with the consequences of water scarcity and natural disasters, for example, through the creation and strengthening of water systems, implementing solutions to mitigate climate-related risks to WASH systems such as construct toilet or water point that is flood or cyclone-proof, the implementation of water-saving technologies and smart system, promoting renewable energy instead that fossil energy and environmental awareness campaigns in schools, engaging youth, with the creation of "environmental clubs" to teach students what climate change is and what causes it, showing practical ways to conserve water or protect natural resources.

THE EFFECTS OF CLIMATE CHANGE ON WASH

Source: WaterAid, 2022.

CLIMATE CHANGE EFFECTS	IMPACT ON WASH
REDUCED RAINFALLS	• Reduction of the availability of drinking water for supply • Reduced flow in rivers • Less dilution/increase in the concentration of pollutants in the water • Threat to hygiene practices
FLOODING	• Pollution and flooding of wells • Inaccessibility of water sources • Flooding of latrines • Damage to infrastructure • Landslides around water sources • Sedimentation and turbidity • Threat to the sustainability of sanitation behaviours • Increase in epidemics and diseases related to contaminated water (waterborne diseases)
DROUGHTS	• Decrease in river outflow • Reduction of infiltrations • Lowering of natural aquifers • Conflicts for the management of natural resources • Increase in diseases related to lack of water (shigella, typhoid fever, diarrhoea, etc.)
RISING TEMPERATURES	• Damage to infrastructure • Increased pathogens in the water resulting in an increased risk of disease • Changes in the seasonality of river flow result in a reduction in water availability in the dry season
RISING SEA LEVELS: flooding and saline intrusion into freshwater	• Reduction in the availability of drinking water, with strong impacts on its quality

HOW DO WE DEAL WITH THESE IMPACTS? WEWORLD'S MODALITIES BETWEEN MITIGATION AND ADAPTATION

Faced with the effects of climate change, such as more severe droughts and floods, more unpredictable rainfall, and dramatic sea level rise, **it is critical to focus on natural and water-based solutions that build resilient societies and ecosystems while reducing greenhouse gas emissions.**

These solutions can have a variety of effects, including increasing nature's capacity to store carbon, improving biodiversity, and assisting society in dealing with catastrophic weather events.
Although WeWorld does not yet have a written and standardised modality, **our WASH and Climate Change/Disaster Risk Reduction approach is based on well-established practices, which we plan to formalise in a document that will serve as a guideline for countries.** The general goal is to guarantee basic WASH services while building inclusive and resilient communities capable of mitigating and dealing with the effects of climate change in the short and long term[48].

Our interventions include:

- → The increase in water saving through innovative technologies, awareness and education campaigns, investments in wastewater treatment and reuse for agricultural purposes, and safe sanitation, as in the case of Palestine, with the MENAWARA and GAZAH2O projects[49].
- → Employing solar-powered water systems, which, on the one hand, guarantees low-cost and sustainable water distribution for communities and, on the other hand, reduces carbon dioxide emissions.
- → Promoting agroecology (also through climate-resistant crops and seeds), rainwater harvesting systems and techniques, agroforestry and small-scale smart irrigation techniques (e.g., drip irrigation), and innovative non-conventional water systems and nature-based solutions systems. Examples of such applications can be found in Kenya with the DRIC project, Nicaragua with our emergency response project to the cyclones, and Mozambique with our Disaster Risk Reduction (DRR) programmes and activities[50].
- → The promotion of environmental campaigns for the protection of natural resources and to protect ecosystems, as we did in Libya with the GAIA project[51].

48 Furthermore, WeWorld, as a member of ChildFund Alliance, a global network for the defence of children's rights, participates in working groups on climate change, where the different members of the network and local partners share good practices, strategies, and case studies to reduce, mitigate, and combat the effects of climate change, in particular, on the most vulnerable groups. In 2023, the Alliance published a document on climate change entitled "Climate and Environmental Action Brief" (available at https://childfundalliance.org/directory_documents/climate-and-environmental-action-brief-2023/).

49 For further information on our interventions in Palestine, see page page 86.

50 More information about these projects can be found in the dedicated country fact-sheets.

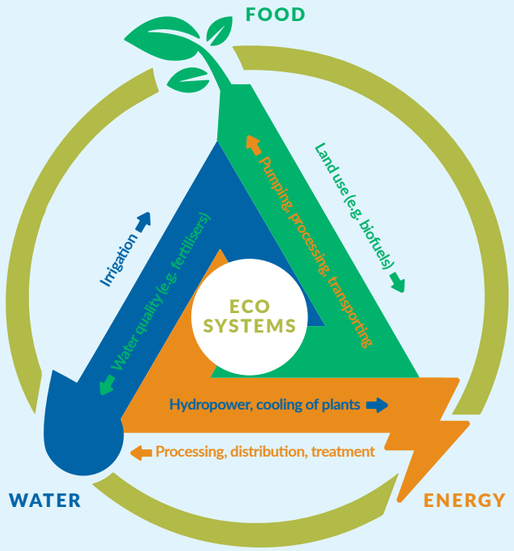
51 For further information on our interventions in Libya, see page page 118.

Over the previous two decades, **the storage of terrestrial water**, including that in soil, snow, and ice, **has dropped** at a pace of **one centimetre per year**, with severe implications for water security

(UN, 2023)

THE NEXUS BETWEEN WATER, ENERGY, FOOD AND ECOSYSTEMS (WEFE)

Climate change is highly impactful on water, energy, agriculture, and ecosystems. **Agriculture consumes the majority of freshwater (more than 70%)** (Ingrao et al., 2023), **with power generation also requiring considerable amounts of it**. On the other hand, because of the consequences of climate change (such as rising temperatures and reduced precipitation), the water demand continues to grow, putting a strain on ecosystems.
Such difficulties must be handled with a strategy that considers the links between these sectors, attempting to manage the various needs for water for electricity and agriculture while protecting ecosystems.



WeWorld employs the Water-Energy-Food-Ecosystem (WEFE) strategy in its interventions, emphasising the interconnectedness of water, energy, and food security, as well as the ecosystems that underpin this security. This is the case, for example, in Palestine, where the implementation of sustainable energy systems coexists with the adoption of innovative methods for water management, treatment and reuse in agriculture to reduce environmental impact and, at the same time, imbalances between water availability and demand.

The EU-funded **MENAWARA project**, conducted in the West Bank until 2023, seeks to alleviate stress on freshwater sources by enhancing the quality of **treated wastewater** (TWW) and utilising it for irrigation. The project, which has been implemented in the community of Beit Dajan, not only acted as a boost for local agricultural methods but resulted in the creation of a water management association among the players involved (the municipality and farmers' associations) in its use, with a good impact on empowerment and community engagement.

The technological, administrative, and operational advancements were made possible by the assistance of a worldwide research organisation such as the Centre of the Public Foundation for New Water Technologies (CENTA), the University of Sassari with NRD - Desertification Research Centre and the International Centre for Advanced Mediterranean Agronomic Studies (CIHEAM) in Bari. With the engagement of universities and research centres in the WASH sector, research, training, and technical support are significant components of WeWorld's initiatives to stimulate innovation.

In this regard, the partnership with TUB-Technische Universität Berlin and Einstein Center Digital Future, (Chair of Smart Water Network) in the **GAZAH2O project**, which was implemented in the Gaza Strip in collaboration with the municipality of Khan Yunis KYM and the Palestinian Water Authority, was also crucial. GAZAH2O intends to minimise water losses in the local supply system while improving water resource management and efficiency. The intervention also included the use of digital technologies (sensors and data-driven algorithms); information and guidelines exchange; and community engagement through awareness and training campaigns to increase technicians' and local authorities' capacities towards smart water network and therefore reduction of non-revenue water (NRW).

With the engagement of universities and research centres in the WASH sector, research, training and technical support are significant components of WeWorld's initiatives to stimulate innovation.

WASH AND ENVIRONMENTAL PROTECTION

Environmental protection or preservation refers to the capacity to safeguard and save the environment and is concerned with humans' interactions with ecosystems. Indeed, many threats to its preservation result from human activity, such as overexploitation of resources (including water), pollution, overcrowding, deforestation, and waste disposal.
When natural resources are destroyed or depleted, the likelihood of negative consequences for people, their health and the ecosystems, increases. **A healthy environment fosters community well-being and resilience.**
Therefore, it is critical to incorporate environmental preservation and adoption of measures to reduce the environmental footprint into WASH activities, supporting sustainable and environmentally conscious behaviours. Taking into account these aspects is also integral to upholding the 'Do No Harm' principle.

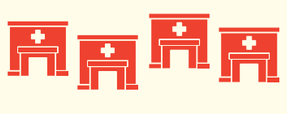
Environmental protection applied to the WASH sector can be achieved on multiple levels:

- → Preservation of water by promoting its reuse, avoiding over-extraction, ensuring water sources' protection and avoiding contamination of aquifers through adequately-constructed facilities;
- → Reduction of greenhouse gas emissions related to water provision by adopting renewable energy and minimizing high footprint systems (i.e. water trucking), etc.;
- → Adoption of adequate plastic and waste disposal techniques, taking into account both the public and the environment health;
- → Promotion of recycling practices, also by integrating environmental issues into educational and awareness-raising activities.

To better understand how WASH and environmental protection are interrelated, let us consider waste management.

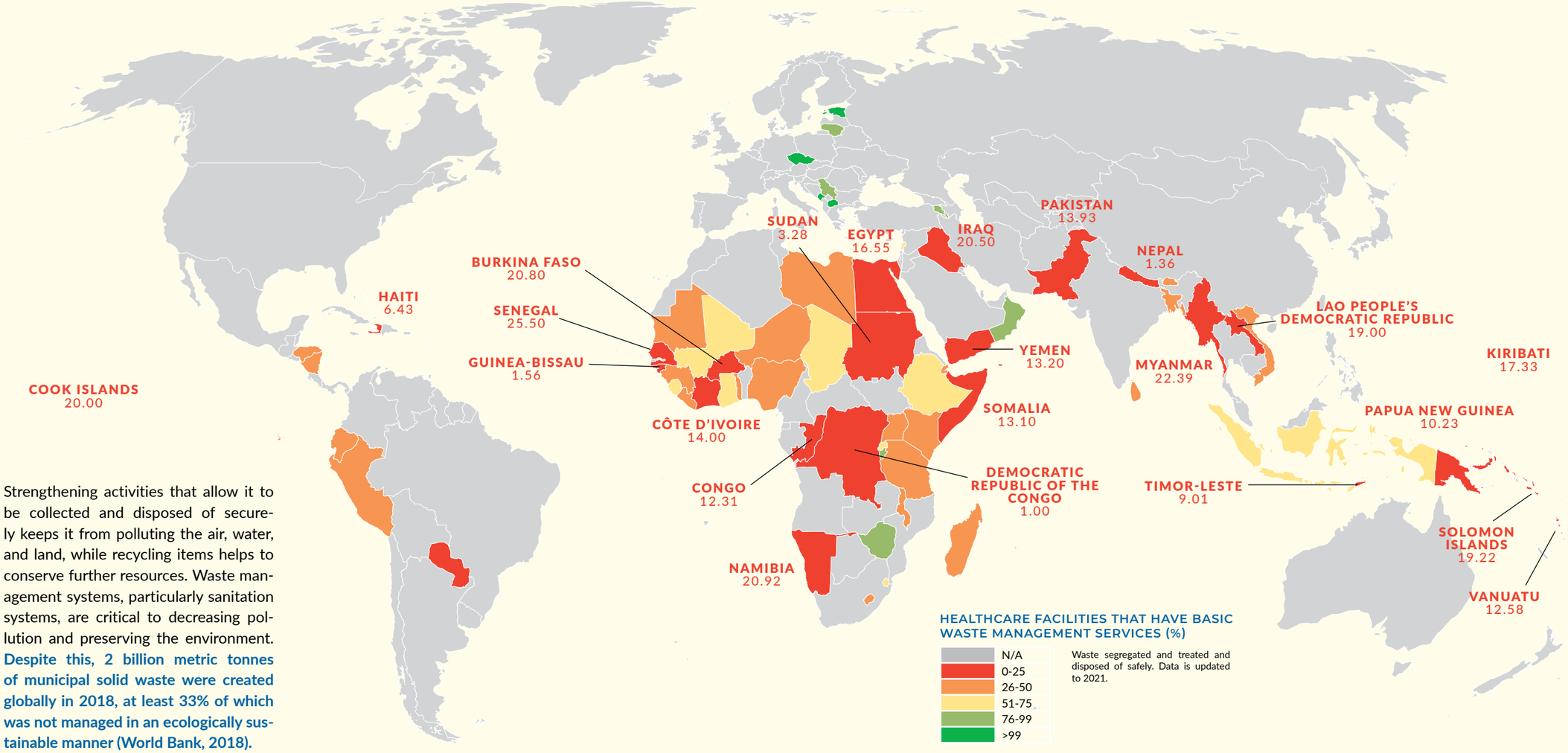
HEALTHCARE FACILITIES THAT HAVE BASIC WASTE MANAGEMENT SERVICES (%)

Source: WHO/UNICEF, 2023



In 2021, **only 6 in 10** (61%) **hospitals** globally had **basic waste management services**

(WHO/UNICEF, 2023)



Strengthening activities that allow it to be collected and disposed of securely keeps it from polluting the air, water, and land, while recycling items helps to conserve further resources. Waste management systems, particularly sanitation systems, are critical to decreasing pollution and preserving the environment. **Despite this, 2 billion metric tonnes of municipal solid waste were created globally in 2018, at least 33% of which was not managed in an ecologically sustainable manner (World Bank, 2018).**

15% of hospital waste is classified as hazardous material (Janik-Karpinska et al., 2023), which can be infectious, poisonous or radioactive and can be incinerated or burned openly. Furthermore, waste adds directly to greenhouse gas emissions, worsening the consequences of climate change. **The waste industry is one of the major emitters of methane (the second gas responsible for global warming after CO2), responsible for around 20% of its emissions** (UNEP, 2021). To avoid detrimental effects on health and the environment, it is vital to provide safe and ecologically friendly waste disposal, both medical and non-medical. WeWorld, for example, has enhanced waste disposal in Libya[52] by supplying covered containers to health institutions and communities for efficient storage and disposal of infectious trash. They also took part in training courses on dangerous waste disposal methods, such as incineration, as well as excellent practices, such as disaggregation and recycling. Finally, national strategies for sustainable management have been developed in collaboration with the Ministry of Local Governance.

Environmental protection is particularly relevant in emergency contexts. WeWorld adheres to the **International Red Cross Code of Conduct**, which explicitly states a commitment to minimise environmental impact when implementing emergency responses. In addition, we adhere to the UN Global Compact initiative, which aims to encourage organisations to promote greater environmental responsibility and more widespread use of low-impact technologies. Within the humanitarian context, we also adhere to **DG-ECHO (Directorate-General for European Civil Protection and Humanitarian Aid Operations) Environmental requirements and recommendations.** More specifically, we can identify environmental concerns through an accurate screening of the actions by adopting the **NEAT+Tool** (the Nexus Environmental Assessment Tool). The latter has been designed for humanitarian actors to quickly identify issues of environmental concern to make emergency and recovery interventions more sustainable.

52 For further information on our interventions in Libya, see page page 118.

WASH and CHILDREN'S RIGHTS

The provision of safe drinking water and proper sanitation is critical to protecting children's health, growth, education, and development. When these services are unavailable or insufficient, children are more likely to become unwell, jeopardising their well-being, learning capacities, and school attendance. Similarly, as girls approach puberty, a lack of or limited access to water, sanitation, and hygiene services often impact girls' safety and well-being while compromising their access and regular attendance in school.

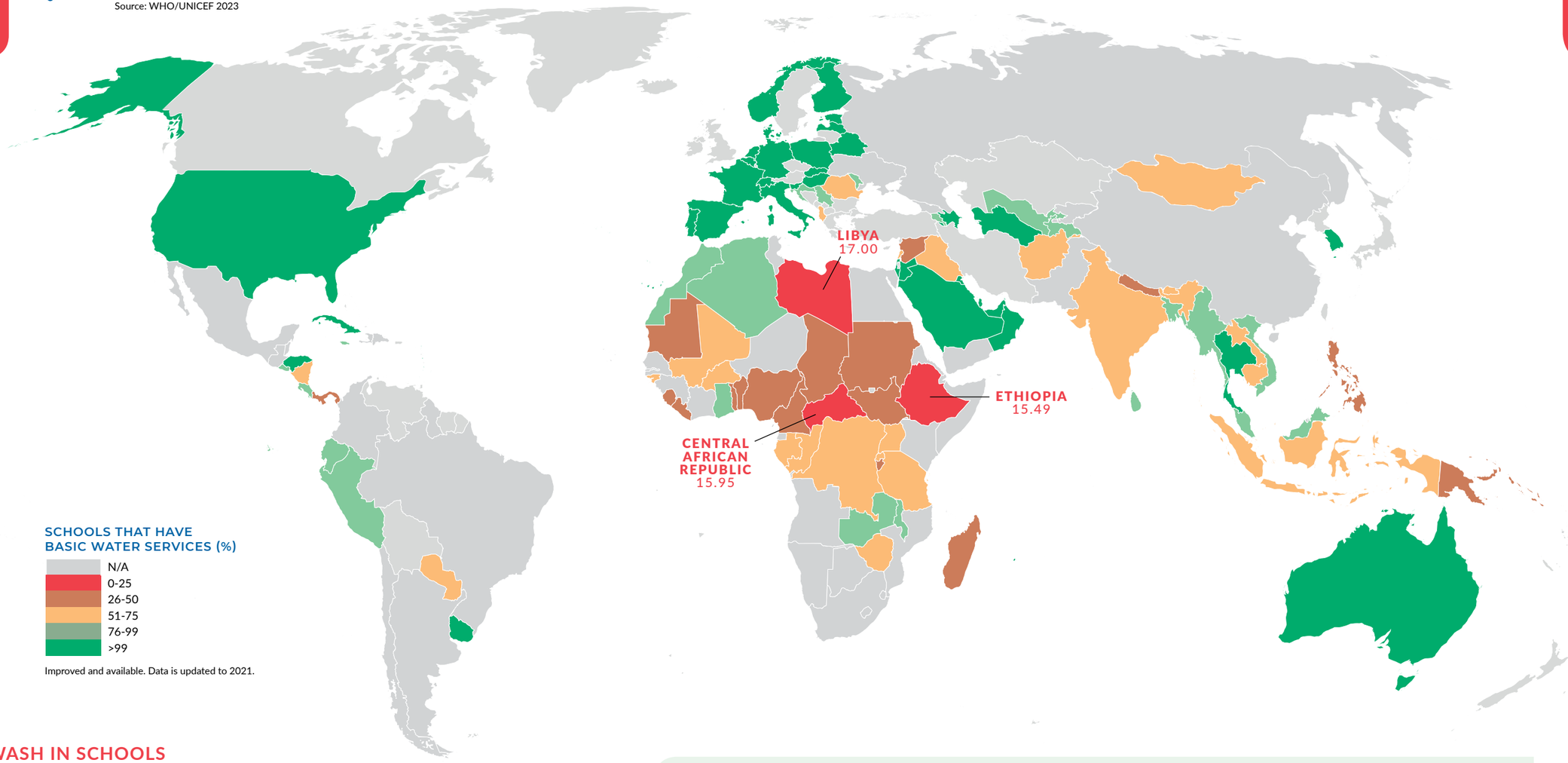
For these reasons, **we incorporate a WASH-education strategy in our interventions**, which is focused on the interconnectedness, acknowledgement, and promotion of children's and adolescents' rights, in particular:

- **The right to adequate WASH services, facilities and items**
- **The right to quality and continuous education**
- **The right to be protected**
- **The right to play**
- **The right to be heard**[55]

55 The Convention on the Rights of the Child - CRC, in Article 12, affirms the principle of participation and respect for the opinion of the minor, recognising the right of all children, boys and girls, to freely express their opinions and be adequately listened to (CRC Committee, 2009).

SCHOOLS THAT HAVE BASIC WATER SERVICES (%)

Source: WHO/UNICEF 2023



Improved and available. Data is updated to 2021.

WASH IN SCHOOLS

Children spend a large amount of their day in school, **where WASH services can improve educational prospects while also lowering the risk of disease transmission among pupils.** Furthermore, schools can serve as secure and private venues for controlling one's personal hygiene while also protecting the dignity, safety, and educational engagement, particularly when it comes to girls, who face specific barriers due to the lack of gender-appropriate WASH services in schools.

For these reasons, **the significance of WASH in schools has been acknowledged internationally, with its inclusion in the SDGs (Goals 4.a, 6.1, and 6.2) as a critical component of a safe, non-violent, inclusive, and appropriate learning environment**.

However, in 2021, 3 out of 10 schools did not have basic water service, and 15% did not have any service at all; as a result, about 546 million students worldwide did not have access to basic drinking water service in their own school. More than 1 in every 4 schools lacked basic sanitation, and 42% lacked basic sanitation (with soap and water), for a total of approximately 802 million children worldwide without basic sanitation (WHO/UNICEF, 2023).

KEY FACTS ABOUT WASH AND CHILDREN'S RIGHTS

- Children's right to health, education, development and protection are severely jeopardised by the lack of access to water, proper sanitation facilities and hygiene items.
- In 2021, 3 out of 10 schools worldwide lacked basic water services, and more than 1 in every 4 lacked basic sanitation facilities (WHO/UNICEF, 2023).
- WeWorld works to create safe, inclusive and appropriate learning environments for all children, adolescent boys and girls, people with disabilities, etc. Moreover, WeWorld engages in awareness campaigns, child-friendly activities, and actions to promote good WASH practices for the entire community. Children's involvement and participation in WASH-related activities is fostered in WeWorld interventions[53].
- In emergency contexts, children's exposure to violence, abuse, neglect and exploitation might increase. To avoid it and comply with the "do no harm principle", WeWorld mainstreams child protection into its WASH related activities[54].

53 In line with the Child Protection Principles set out by the Convention on the Rights of the Child (CRC): Survival and Development, Non-Discrimination and Inclusion, Children Participation and the Best Interest of the Child.

54 In line with Standard 23 Education and Child Protection and Standard 26 WASH and Child Protection of the Minimum Standards of Child Protection in Humanitarian Action.

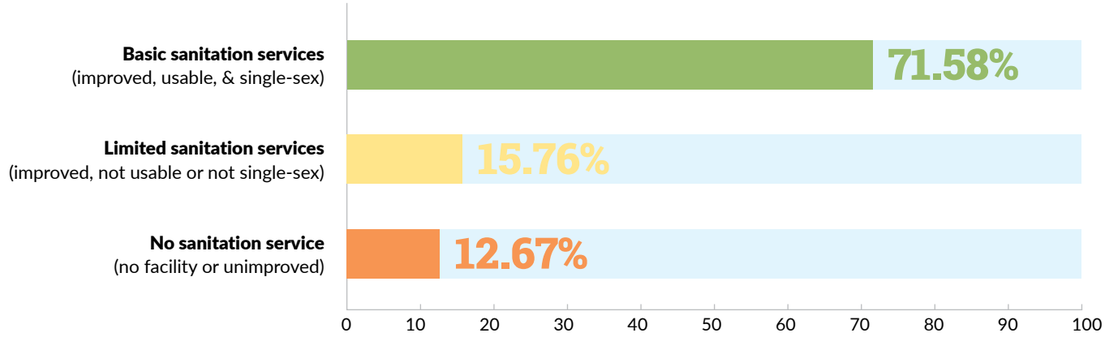
JMP SERVICE LADDERS FOR GLOBAL MONITORING OF WASH IN SCHOOLS

For further information see https://washdata.org/sites/default/files/2022-09/jmp-2021-wins-methodology-final.pdf

SERVICE LEVEL	DRINKING WATER	SANITATION	HYGIENE
BASIC SERVICE	Drinking water from an improved source and water is available at the school at the time of the survey	Improved sanitation facilities at the school that are single-sex and usable (available, functional and private) at the time of the survey	Handwashing facilities with water and soap available at the school at the time of the survey
LIMITED SERVICE	Drinking water from an improved source but water is unavailable at the school at the time of the survey	Improved sanitation facilities at the school that are either not single-sex or not usable at the time of the survey	Handwashing facilities with water but no soap available at the school at the time of the survey
NO SERVICE	Drinking water from an unimproved source or no water source at the school	Unimproved sanitation facilities or no sanitation facilities at the school	No handwashing facilities or no water available at the school

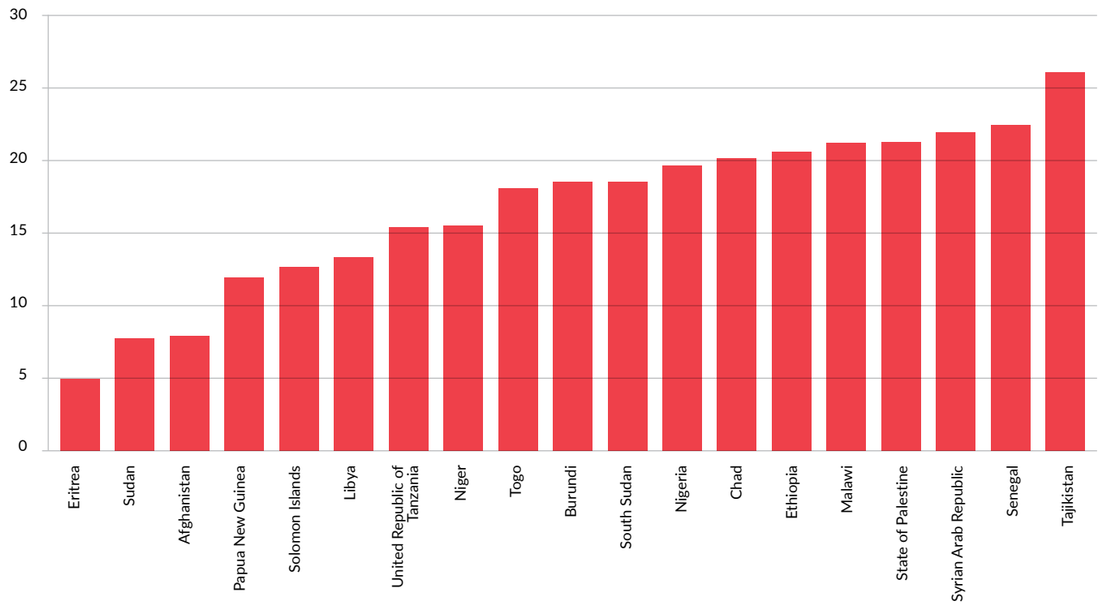
SCHOOLS AND SANITATION SERVICES WORLDWIDE (%)

Data is updated to 2021. Source: WHO/UNICEF 2023



SCHOOLS THAT HAVE BASIC HYGIENE SERVICES (SOAP AND WATER) (%)

Only countries scoring between 0-25 are reported. Data is updated to 2021. Source: WHO/UNICEF 2023



WEWORLD'S WASH IN SCHOOLS MODALITY

WeWorld adopted the WASH in Schools (WinS) framework as part of its worldwide intervention strategies in WASH and education, resulting in a **significant synergy between these two sectors. The WASH component is now required in all countries where WeWorld works on educational programmes.**

In 2021, we created the document **"WASH in Schools (WinS) Modality,"** thanks to the work of a team of WASH and education experts. The document aims to be a reference for all WASH activities implemented in schools, outlining the guiding principles to be considered when offering WASH support in various types of educational settings. These principles define a common style of work based on best practices and case studies, allowing them to be scaled and customised to specific contexts. **The guiding principles concern the availability and accessibility of sanitation services, which should be tailored to the unique requirements of all children, gender and age sensitive, disability inclusive, and economically, socially, and environmentally sustainable.**

These guidelines emphasise the importance of taking the gender dimension into account when providing water and promoting sanitation and hygiene in schools: **gender-separated toilets, doors with functional locks and lighting for privacy and security, as well as menstrual hygiene management services, must be available to ensure a dignified and equitable learning environment, particularly for girls.**

Pupils and/or teachers are frequently inhibited or unable to manage their menstrual health with dignity due to inadequate water and sanitation facilities, a lack of understanding and awareness, stigmatisation and access to adequate menstrual materials. As a result, girls can miss time in school during menstruation. Promoting proper menstrual health habits at school contributes to increased involvement and self-confidence and have a favourable influence on pupils' and teachers' school attendance (see the section "WASH and Gender Equality").

Finally, WASH strategies must be created to prevent discrimination, abuse, exploitation, or violence against boys and girls, including children with disabilities. Preventive and protection measures for children must be included in WASH operations, ensuring access to secure structures and appropriate information, which can lower the risk of violence, particularly for girls.

We have implemented this modality in almost all our operation countries with educational interventions precisely because we believe that WASH and Education sectors are intrinsically linked. This Atlas contains several examples from many countries, such as Kenya, Tanzania, Nicaragua, Syria, etc., where we intervene in primary and secondary schools and other educational facilities.

BEYOND FORMAL EDUCATION

The availability of adequate and safe WASH services in school benefits children's health, education, and general well-being. Because students spend so much time in school, the latter are the best place to learn and implement adequate WASH practices. Safe water distribution in schools is a highly effective approach for enhancing access to education and learning outcomes (UNICEF/WHO, 2018). Aside from the requirement for water for personal and environmental cleanliness, lowering student dehydration in schools has been linked to better cognitive ability. **The benefits, however, extend beyond the classroom: adopting proper WASH practices in school improves not just future generations' health, but also the well-being of the communities in which they reside, and hence the growth of society as a whole. Girls and boys, as agents of change, can positively impact the behaviour of their family and community members.**

Children may play an important role in disseminating WASH messages and good practices by educating and passing on knowledge to other children (peer education) or community members during communal activities. **Finding innovative and original age-appropriate ways to engage and promote their involvement is extremely critical. This is why we experiment many educational strategies in our interventions, such as games, theatrical performances, songs, nursery rhymes, chants, and paintings, which may help youngsters learn while having fun.** This is the case in Mozambique[56], where we developed community awareness-raising events, workshops, and creative courses accompanied by COVID-19 and cholera preventive products. Young people helped spread good hygiene habits by passing them on to parents, family members, and the community, which became the focus of awareness campaigns with door-to-door visits, megaphones, and radio broadcasts.

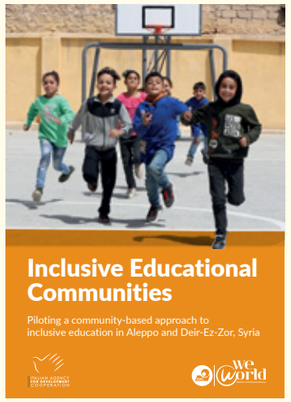
We also work to encourage children's participation by creating safe environments in which they can discuss, express, and co-decide on issues that concern them so that – under one of the fundamental principles of the UN Convention on the Rights of the Child (Article 12) – their voice can be heard. Children's engagement in group activities can positively impact their well-being, enhance their resilience and reduce their stress, particularly in contexts of conflict and acute crisis. Group activities, like those organised in child friendly spaces, provide opportunities for children to come together in a stimulating environment, increasing their sense of safety, normalcy and connectedness. Such activities can also promote protection by identifying children who are vulnerable or who are experiencing abuse, neglect, exploitation or violence and supporting appropriate referrals.

In Moldova[57], for example, educational and recreational activities are carried out with educators inside two child-friendly spaces to provide children and adolescents with the chance to play, rest, connect, get psychological support, thus improving their resilience in the face of hardship. These are safe spaces for listening, exchanging, communicating and thriving.

> Girls and boys, as agents of change, can positively impact the behaviour of their family and community members.

56 For further information on our intervention in Mozambique, see page page 123.

57 For further information on our intervention in Moldova, see page page 166.



INCLUSIVE EDUCATIONAL COMMUNITIES

Building inclusive learning environments that are safe and accessible to everyone is critical to adequately protecting children's rights. To that purpose, WeWorld adopts an inclusive education approach, which is detailed in the document **"Inclusive educational communities. Piloting a community approach to inclusive education in Aleppo and Deir-Ez-Zor, Syria,"** a project focused on the Syrian context but applicable, if appropriately contextualised, to other regions too.

Acting on inclusion entails not just removing barriers to quality education, learning, and social involvement but also incorporating child safety measures into humanitarian operations, such as WASH and education. Many children are victims of violence, abuse, and exploitation, particularly in emergencies and protracted crises. It is vital to strive to ensure that all children at risk of violence have access to adequate and safe WASH services, both at school and home, that lower their chances of being bullied, harassed or physically and sexually assaulted.

In Syria[58], we implemented the project "Inclusive education and income generation opportunities for the creation of resilient communities in underserved areas of the governorates of Aleppo and Deir-Ez-Zor[59]", which involved testing an inclusive education approach in 8 schools and educational communities, before applying it to more than 110 schools. The intervention included the construction of gender-sensitive toilets (separated and equipped for the specific needs of each person) to provide girls and boys with intimate spaces; also, architectural barriers were removed, accessible toilets for people with disabilities were constructed; hygiene and cleaning kits were distributed; awareness-raising initiatives on infection prevention and control (such as COVID-19) were also implemented through games, drawings, and songs with the active involvement of pupils and their parents.

58 For further information on our intervention in Syria, see page page 94.

59 The inclusive educational approach was presented and discussed with stakeholders at national and governorate levels, in particular with the Ministry of Education of Damascus and the Ministry of Education of Aleppo and Deir-Ez-Zor.

WASH and GENDER EQUALITY

Due to physiological and socio-cultural reasons, women and girls are disproportionately affected by limitations or exclusion from access to clean, drinking water and quality sanitation and hygiene services, producing a vicious spiral with cascading negative repercussions in several aspects of life. Women and girls' empowerment and involvement in community decision-making processes are hampered because they are excluded from water resource governance. Education and sexual and reproductive health suffer as a result of frequently insufficient WASH services at home and in schools. Because they are the primary collectors of water, they are vulnerable to violence and hostility on the trek to the source.

WeWorld employs a gender-sensitive approach in all its WASH operations, allowing it to recognise power imbalances resulting from gender stereotypes in both the public and private spheres. It also enables us to emphasise the primary vulnerabilities, discriminations, and social, cultural, or economic barriers that prevent women and girls from having full access to safe water and sanitation and hygiene services.

WeWorld employs a gender-sensitive approach in all its WASH operations, allowing it to recognise power imbalances resulting from gender stereotypes in both the public and private spheres.

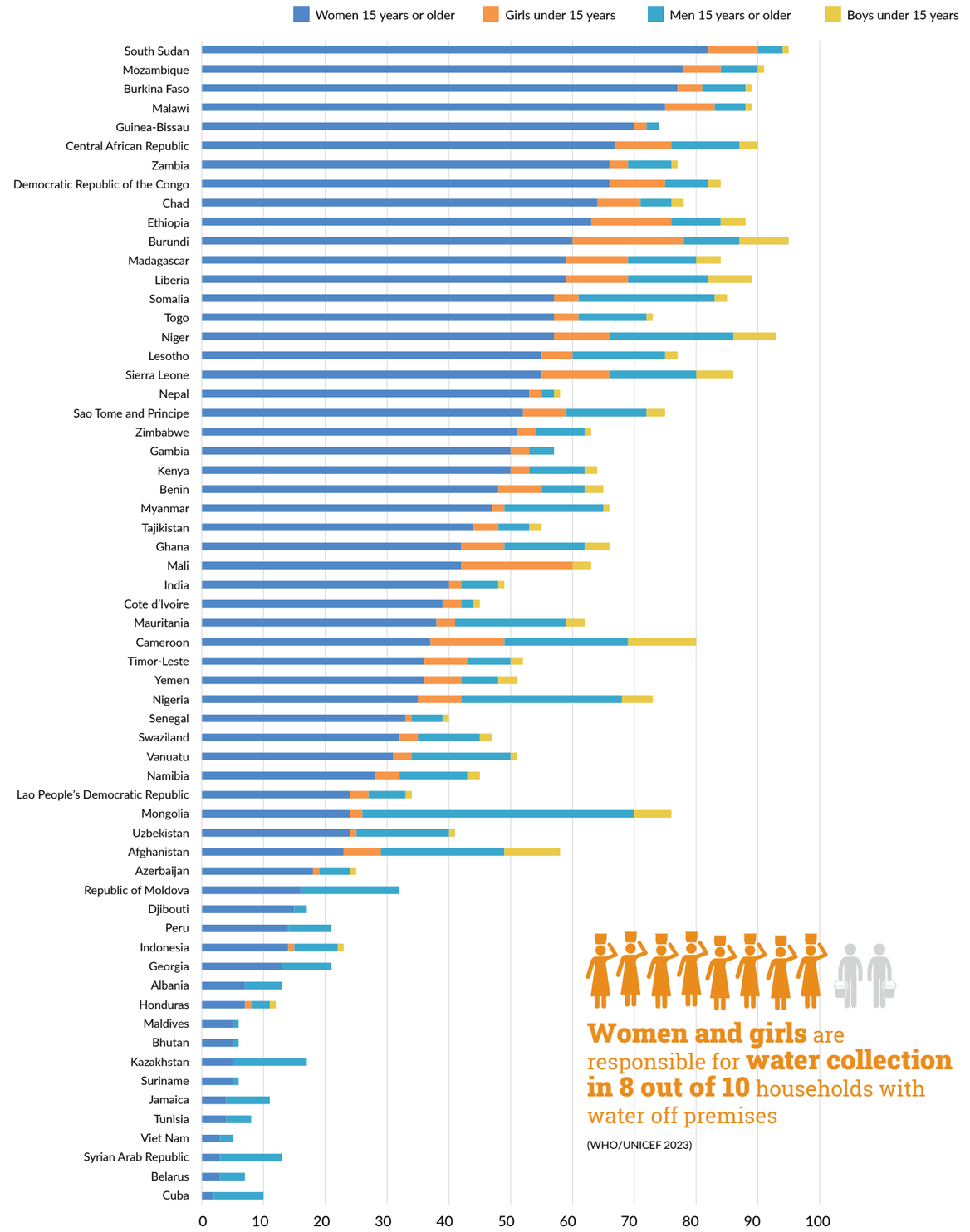
KEY FACTS ABOUT WASH AND GENDER EQUALITY

- Promoting access to safe, drinking water and sanitation and hygiene services for women and girls produces interconnected beneficial effects in terms of empowerment and participation, education, sexual and reproductive health, and freedom from violence and harassment.
- In countries where water resources are not available at home, in 8 out of 10 families, women and girls are primarily responsible for collecting it (WHO/UNICEF, 2023).
- Inadequate and non-gender-separated WASH services limit the ability of women and girls, as well as other menstruating people[60], to safely and privately manage their menstrual cycle, with risks to their sexual and reproductive health (WHO/UNICEF, 2023).
- Gender equality is at the heart of every WeWorld effort and intervention in the WASH sector, intending to increase female empowerment and combat gender discrimination. The gender mainstreaming approach, which is used at every stage of any intervention, enables us to employ gender analysis as a tool to understand the role of women in society as well as their level of engagement and involvement in decision-making processes.

60 In this case, the term "people" is not used without reason. Indeed, although the specific focus of this Atlas is women and girls, it is important to remember that not all people who menstruate are women; there are, for example, transgender and intersex people who experience menstruation. Therefore, when talking about menstrual health, we should broaden the field to other aspects, such as the discrimination suffered by more vulnerable categories, such as the LGBTQIA+ community, which goes beyond female biology alone.

PERSON PRIMARILY RESPONSIBLE FOR WATER COLLECTION, BY GENDER AND AGE (%)

Data is updated to 2017. Source: WHO 2017



Women and girls are responsible for **water collection in 8 out of 10** households with water off premises

(WHO/UNICEF 2023)

WASH AND PROTECTION FROM GENDER-BASED VIOLENCE (GBV)

Collecting water for the entire family, using bathrooms that are non-gender-separated, or not having access to sanitation and hygiene services all pose risks to the safety of women and girls, who may face attacks, harassment, sexual violence, and robberies on their way from the house to the water source or even at night when they are forced to resort to open defecation for reasons of discretion (WaterAid, 2015).

Sexual, physical, psychological, and economic violence against women and girls across the world is perpetuated by power imbalances and gender stereotypes. Forms of gender-based violence can present themselves at any moment and in any environment, in times of peace or instability, precisely because they stem from deeply ingrained patriarchal socio-cultural norms.

However, during crises and emergencies, the chances of experiencing violence increase, making women and girls more vulnerable: not only may pre-existing risks be intensified and elevated, but new dangers can arise (UNICEF, 2022a). Indeed, armed wars, humanitarian crises, and natural catastrophes erode society's ability to implement procedures to prevent and address gender-based violence (ibid.). As a result, WASH initiatives in such settings must always be gender-inclusive, providing a timely and effective response in terms of access to water and quality sanitation services, and therefore reducing the risk of gender-based violence. **When a crisis occurs, for example, it is not a given (but it is critical) that attention is paid to the unique requirements of women and girls, such as menstruation. Menstrual hygiene management kits and dignity kits, which are specially created for more specific needs than those covered by traditional hygiene kits, are useful aids in this regard.**

1 in every **3 women** has suffered **physical or sexual assault** in her lifetime

(UNICEF, 2022a)

DIFFERENT KITS FOR DIFFERENT PURPOSES

WeWorld elaboration of "Addressing menstrual hygiene management (MHM) needs – Guide and Tools for Red Cross and Red Crescent Societies"

	HYGIENE KITS	MENSTRUAL HYGIENE MANAGEMENT (MHM) KITS		DIGNITY KITS
TARGET USER	Family	Personal (one kit per menstruating person)		Personal (one kit per female)
TYPES OF KITS	5 to 7 people per household (or family) Standard kits, as well as regional and country adaptations	Disposable MHM Kit	Reusable MHM Kit	Female dignity kit
PURPOSE	To provide basic hygiene items for a household of 5 people, for a period of 1 month	To provide essential materials and items, which enable menstruating people to manage their menstruation hygienically and with dignity.		To support dignity of women and girls, including improving safety and mobility, and to provide information about reproductive health and GBV related issues and services.
WHICH ITEMS CAN THEY CONTAIN?	• Soap • Detergents • Sanitary items • Brushes • Toothpastes • Shampoo • Balm • Body lotions • Towel • Comb • Razor • Handkerchiefs • Hand sanitizers	• Reusable or disposable menstrual products • Linen • Containers, buckets, and detergents for washing clothes and products • Painkillers for menstrual pain		• Towels • Soap • Shampoo • Laundry detergents and soaps • Comb • Bedpan • Pads and tampons • Electric torch • Whistle • Linen • Handkerchiefs

WASH AND WOMEN'S PARTICIPATION TO DECISION-MAKING PROCESSES

A gender perspective should be incorporated into every WASH strategy, first and foremost because, even though women and girls are the primary users, suppliers, and managers of water in their homes, as well as those primarily responsible for domestic hygiene, they continue to be excluded from related decision-making processes on the resource's use and management.

Because women are underrepresented in decision-making processes and often have little control over community-level decisions, these do not reflect their concerns and interests. Making them protagonists in the administration of water and sanitation services, on the other hand, is a critical step in a broader empowerment process. **Only a systemic approach aimed at closing the gender gap in decision-making and management roles can address the underlying factors that prevent women and adolescents from gaining access to and control over resources, raising female awareness, promoting women's presence in decision-making centres of society, politics, and the economy, increasing their self-esteem and skills, and making them role models and sources of inspiration for other women** (WaterAid, 2015).

The intervention in Mozambique's rural communities[61], where WeWorld has started a process of female empowerment by integrating women and girls in water resource management and well maintenance committees, is an example of this strategy. Not only is women's access to and control over water concretely fostered in this way, but female self-esteem and capacities are also boosted, with advantages for the entire community. **This example highlights how gaining universal access to clean water and adequate sanitation services cannot be undertaken without also aiming for gender equality and the full participation of women and girls.**

61 For further information on our intervention in Mozambique, see page page 123.

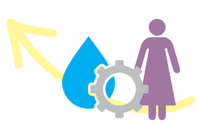
An estimated **500 million** people **lack access to menstrual products**

(World Bank, 2022)

LAW/POLICY SPECIFICALLY MENTIONS WOMEN'S PARTICIPATION

Data is updated to 2021.
Source: GLAAS/WHO 2023

	SANITATION		DRINKING-WATER		HYGIENE	WATER RESOURCES MANAGEMENT
	URBAN LAW OR POLICY	RURAL LAW OR POLICY	URBAN LAW OR POLICY	RURAL LAW OR POLICY	PROMOTION NATIONAL LAW OR POLICY	NATIONAL
Albania	NO	NO	NO	NO	NO	YES
Angola	NO	YES	YES	YES	YES	
Argentina	NO	NO	NO	NO	NO	NO
Azerbaijan	NO	NO	NO	NO	NO	NO
Bahrain	NO	NO	NO	NO	NO	NO
Bangladesh	YES	YES	YES	YES	YES	YES
Belarus	NO	NO	NO	NO	NO	NO
Belize	YES	YES	YES	YES	YES	YES
Benin	YES	YES	NO	YES	YES	YES
Bhutan	YES	YES	YES	YES	YES	YES
Bolivia (Plurinational State of)	YES	YES	YES	YES	NO RESPONSE	NO
Bosnia and Herzegovina	NO	NO	NO	NO	NO	NO
Botswana	NO	NO	NO	NO	NO	NO
Brazil	NO	NO	NO	NO	NO RESPONSE	NO
British Virgin Islands	NO	NO	NO	NO	NO	NO
Burkina Faso	YES	YES	YES	YES	YES	YES
Burundi	YES	YES	YES	YES	YES	NO RESPONSE
Cabo Verde	YES	YES	YES	YES	YES	YES
Cambodia	YES	YES	YES	YES	YES	YES
Cameroon	NO RESPONSE	YES	NO RESPONSE	YES	YES	NO
Central African Republic	YES	YES	YES	YES	YES	YES
Chad	YES	YES	YES	YES	YES	YES
Chile	NO	NO	NO	NO	NO RESPONSE	NO RESPONSE
China	NO	NO	NO	NO	NO	NO
Colombia	NO	NO	NO	NO	NO RESPONSE	NO
Comoros	YES	YES	YES	YES	YES	YES
Congo	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Costa Rica	NO	NO	NO	NO	NO RESPONSE	NO
Côte d'Ivoire	NO	NO	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Croatia	NO	NO	NO	NO	NO	NO
Cuba	YES	YES	YES	YES	YES	YES
Democratic Republic of the Congo	YES	YES	YES	NO RESPONSE	NO	YES
Dominican Republic	NO	NO	NO	NO	NO RESPONSE	NO
Ecuador	NO	NO	NO	NO	NO	YES
Egypt	YES	YES	YES	YES	YES	YES
El Salvador	YES	YES	YES	YES	YES	YES
Eritrea	NO RESPONSE	YES	YES	YES	YES	YES
Estonia	NO	NO	NO	NO	NO	NO
Ethiopia	YES	YES	YES	YES	YES	NO RESPONSE
Fiji	YES	YES	YES	YES	NO RESPONSE	NO RESPONSE
Gabon	NO	NO	NO	NO	NO	NO
Gambia	YES	YES	NO	YES	YES	YES
Georgia	YES	YES	YES	YES	YES	YES
Ghana	YES	YES	YES	YES	YES	YES
Greece	NO	NO	NO	NO	NO	NO
Grenada	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Guatemala	YES	YES	YES	YES	YES	YES
Guinea	YES	YES	YES	YES	YES	YES
Guyana	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Haiti	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Honduras	YES	YES	YES	YES	YES	YES
Hungary	NO	NO	NO	NO	NO	NO
Indonesia	YES	YES	YES	YES	YES	YES
Iran (Islamic Republic of)	NO	NO	NO	NO	NO	NO
Iraq	NO	NO	NO	NO	NO	NO
Italy	NO	NO	NO	NO	NO RESPONSE	NO
Jamaica	YES	YES	YES	YES	NO RESPONSE	NO
Jordan	NO	NO	NO	NO	NO	NO
Kazakhstan	NO	NO	NO	NO	NO	NO
Kenya	NO	NO	YES	YES	NO	YES
Kuwait	YES	NO RESPONSE	YES	NO RESPONSE	YES	YES
Kyrgyzstan	NO	NO	NO	NO	NO	NO
Lao People's Democratic Republic	YES	YES	YES	YES	YES	YES
Lebanon	NO	NO	NO	NO	NO	NO
Lesotho	YES	YES	YES	YES	YES	YES
Liberia	NO	YES	NO	YES	YES	YES
Madagascar	YES	YES	YES	YES	NO RESPONSE	YES
Malawi	YES	YES	YES	YES	YES	YES
Maldives	NO	NO	NO	NO	NO RESPONSE	NO
Mali	YES	YES	YES	YES	YES	YES
Marshall Islands	YES	YES	YES	YES	YES	YES
Mauritania	YES	YES	YES	YES	YES	YES
Mauritius	YES	YES	YES	YES	YES	YES
Mexico	NO	NO	NO	NO	NO RESPONSE	NO
Mongolia	NO	NO	NO	NO	NO	NO
Montenegro	NO	NO	NO	NO	NO	NO
Morocco	YES	YES	YES	YES	NO RESPONSE	YES
Mozambique	YES	YES	YES	YES	YES	YES
Namibia	NO	NO	NO	YES	NO	YES
Nepal	NO	NO	YES	YES	NO RESPONSE	NO RESPONSE
Nicaragua	YES	YES	YES	YES	YES	YES
Niger	YES	YES	YES	YES	YES	YES
Nigeria	YES	YES	YES	YES	YES	NO RESPONSE
Norway	NO RESPONSE	NO RESPONSE	NO	NO	NO RESPONSE	NO RESPONSE
occupied Palestinian territory, including east Jerusalem	YES	YES	YES	YES	YES	YES
Oman	YES	YES	YES	YES	YES	YES
Pakistan	YES	YES	YES	YES	YES	YES
Panama	NO	NO	NO	NO	YES	NO
Papua New Guinea	YES	YES	YES	YES	YES	YES
Paraguay	NO	NO	NO	NO	NO RESPONSE	NO
Peru	NO	YES	NO	YES	NO	NO RESPONSE
Philippines	YES	YES	YES	YES	YES	YES
Romania	NO	NO	NO	NO	NO RESPONSE	NO
Saint Lucia	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Sao Tome and Principe	YES	YES	YES	YES	YES	YES
Senegal	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE	NO RESPONSE
Serbia	YES	YES	YES	YES	YES	YES
Seychelles	YES	YES	YES	YES	YES	YES
Sierra Leone	YES	YES	YES	YES	YES	YES
Solomon Islands	YES	YES	YES	YES	YES	YES
Somalia	NO	NO	NO	NO	NO	NO
South Africa	YES	YES	YES	YES	YES	YES
South Sudan	YES	YES	YES	YES	YES	YES
Sri Lanka	YES	YES	YES	YES	YES	
Sudan	YES	YES	YES	YES	YES	YES
Syrian Arab Republic	YES	YES	YES	YES	YES	YES
Tajikistan	YES	YES	YES	YES	YES	YES
Thailand	YES	YES	YES	YES	YES	YES
Timor-Leste	YES	YES	YES	YES	YES	YES
Togo	YES	YES	YES	YES	YES	YES
Trinidad and Tobago	NO	NO	NO	NO	NO	NO
Tunisia	NO	NO	NO	YES	YES	NO
Turkmenistan	NO	NO	NO	NO	NO	NO
Tuvalu	YES	YES	YES	YES	YES	YES
Uganda	YES	YES	YES	YES	YES	YES
Ukraine	NO	NO	NO	NO	NO	NO
United Republic of Tanzania	YES	YES	YES	YES	YES	YES
Uruguay	NO	NO	NO	NO	NO	NO
Uzbekistan	NO	NO	NO	NO	NO	YES
Viet Nam	NO	NO	NO	NO	NO RESPONSE	NO
Yemen	YES	YES	YES	YES	YES	YES
Zambia	YES	YES	YES	YES	YES	YES
Zimbabwe	YES	YES	YES	YES	YES	YES



In 2021, **only 65 out of 123 countries** with available data **had a national law/policy** specifically mentioning **women in water resources management**

(GLAAS/WHO, 2023)

WASH, MENSTRUAL HEALTH AND EDUCATION

Responsibility in water collection represents a barrier for girls' access to education: girls miss out on valuable learning opportunities because they are forced to spend a significant portion of their time pursuing this activity or, if no sanitation services are available, to find a safe place to defecate or urinate outdoors. Moreover, the lack of adequate gender-friendly sanitation facilities increases the possibility of girls missing school days and even dropping out of school.

Lack of gender-sensitive WASH facilities for menstrual health management constitutes another barrier. People's capacity to attend school and fully enjoy other aspects of life and fundamental rights may be hampered by challenges in managing their menstrual health. **Every month, an estimated 1.8 billion people menstruate around the world**, but many still have limited access to adequate hygiene infrastructure, such as safe, private, and accessible sanitation facilities with soap and water where they can change clothes and clean or dispose of menstrual hygiene products. This still represents a widespread need (UNICEF, 2019).

Every month, an estimated **1.8 billion people menstruate** around the world

(WASH United, 2022)

WHAT IS MEANT BY MENSTRUAL HEALTH?

Menstrual hygiene and menstrual health are frequently used interchangeably. **However, in the strictest sense, menstrual hygiene refers only to the types of hygiene products used to deal with menstruation or the daily process of menstrual hygiene management**. Furthermore, the term has a negative connotation, which reinforces the stigma that menstruation is dirty or impure (PERIOD, 2022). Significant efforts have been made in the context of sexual and reproductive justice to shift from the concept of "menstrual hygiene" to that of "menstrual health", which extends beyond the simple management of the menstrual period to include the entire menstrual cycle as well as general health and well-being. **Menstrual health is defined as a complete state of physical, mental, and social well-being during the menstrual cycle, rather than simply the absence of disease or infirmity** (PERIOD, 2022).

Achieving menstrual health means that women, girls, and anyone else who has a menstrual cycle can:

- → Access accurate, timely, and age-appropriate information about the menstrual cycle, menstruation, and changes experienced throughout life, as well as related self-care and hygiene practices.
- → Take care of their body during their period in a way that supports their hygiene, comfort, privacy, and safety preferences. This includes having access to and using effective and affordable menstrual materials, as well as having supportive facilities and services available, such as clean water, accessible sanitation, body and handwashing facilities, the ability to change menstrual materials, and clean and/or dispose of used materials.
- → Access appropriate health services, as well as timely diagnosis, treatment, and care for menstrual cycle discomforts and disorders.
- → Live in a positive and menstrual-friendly environment free of stigma and psychological distress, where they can get the help they need to take care of their bodies and make informed decisions.
- → Decide whether and how to participate in all aspects of life, including civil, cultural, economic, social, and political participation, during all phases of the menstrual cycle, without exclusion, restriction, discrimination, coercion, and/ or violence.

MENSTRUAL MATERIALS AND SUPPLIES WITHIN A HUMANITARIAN SETTING

MENSTRUAL MATERIALS they are the actual items needed to catch blood	MENSTRUAL SUPPLIES they support the proper usage of menstrual materials
• Pads • Cloth • Tampons • Menstrual cups • Menstrual underwear • (Both reusable and disposable materials)	• Soap • Bucket • Underwear • Clothes pins • Storage bag • Instructions

MENSTRUAL HEALTH ACCESS AND BEHAVIOUR

Data, updated to 2022, refers to the proportion of girls and women aged 15-49 who have menstruated in the previous years. Source: WHO/UNICEF 2023

COUNTRY	PRIVATE PLACE TO WASH AND CHANGE	PARTICIPATION IN ACTIVITIES DURING MENSTRUATION	USE OF REUSABLE MATERIALS	USE OF SINGLE-USE MATERIALS
Algeria	90.17	75.73	4.77	89.53
Bangladesh	96.72		66.16	30.2
Burkina Faso	73.69	84.5	49.62	37.23
Cambodia	96.1			
Central African Republic	92.04	68.86	61.87	32.9
Chad	93.41	67.37	80.38	14.58
Costa Rica	98.96	93.3	1.9	96.43
Côte d'Ivoire	79.85	77.83	50.02	49.14
Cuba	95.46	72.45	2.62	94.95
Democratic Republic of the Congo	90.38	85.8	55.6	38.93
Dominican Republic	95.31	78.12	2.2	95.85
Ethiopia	79.85		46.26	37.03
Fiji	95.75	76.88	11.75	85.38
Gambia	96.09	79.77	58.12	39.95
Ghana	93.87	81.13	12.55	85.32
Guinea-Bissau		91.83		
Guyana	93.35	79.75	1.96	94.44
Honduras	96.54	80.75	3.06	94.73
India		94.87		
Indonesia	93.16		12.82	85.34
Iraq	88.63	89.38	11.14	84.75
Kenya	89.14		12.63	86.42
Kiribati	92.81	83.92	16.02	82.01
Kyrgyzstan	93.29	93	18.03	78.7
Lao People's Democratic Republic	80.96	88.16	2.83	78.86
Lesotho	94.71	86.86	7.56	90.4
Madagascar	90.79	91.69	72.99	20.76
Malawi	92.53	87.31	68.49	28.85
Mongolia	89.49	96.81	2.59	88.57
Montenegro	97.11	93.25	4.02	92.86
Nepal	86.56	0	58.94	34.95
Niger	51.5		63.26	22.5
Nigeria	92.83	83.42	41.28	55.58
North Macedonia	97.67	93.4	0.86	97.7
Pakistan	88.38	79.11	53	35.49
Samoa	84.66	91.04	17.96	73.76
Sao Tome and Principe	94.31	89.04	96.63	2.78
Serbia	98.94	90.84	0.51	97.85
Sierra Leone	92.91	79.85	67.57	29.49
State of Palestine	80.47	86.1	2.13	94.13
Suriname	96.04	82.51	3.52	89.23
Togo	91.53	87.88	57.22	39.11
Tonga	94.05	84.42	0.92	92.93
Tunisia	56.2	89.02	3.66	92.26
Turkmenistan	98.88	99.12	0.84	98.27
Turks and Caicos Islands	96.47	87.26	1.15	96.02
Tuvalu	94.39	84.37	17.62	77.26
Uganda	86.98		40.86	57.13
Uzbekistan	96.69	92.78	14.31	82.06
Viet Nam	97.06	96.02	1.18	96.97
Zimbabwe	96.61	83.7	21.59	76.21

Menstruation continues to have a significant impact on women's and girls' access to and participation in education around the world, owing to discriminatory norms and practices based on gender stereotypes that make menstruation a taboo in several cultures, where it is associated with something dirty and thus avoided. **As a result, women's and girls' menstrual health needs are unfulfilled, and menstruation may result in shame, harassment, or social isolation.**

The term "menarche" refers to the first menstruation. Menarche normally occurs between the ages of 10 and 16 and is affected by genetic and environmental factors[62]. **Menarche is frequently related to female puberty, marking the hormonal changes that allow reproduction. Menarche has a social value in some societies, as it marks the transition from the status of a child to that of a woman (connecting to phenomena such as female genital mutilation, early marriage, and pregnancies), with a slew of consequences in terms of access to social life and, most importantly, education.** This represents a great paradox, especially if we consider that schools could represent privileged places for the menstrual health of millions of girls, places where they receive adequate menstrual materials and learn good personal hygiene practices. Yet, in many countries, schools still face significant challenges in ensuring the availability of adequate facilities for girls.

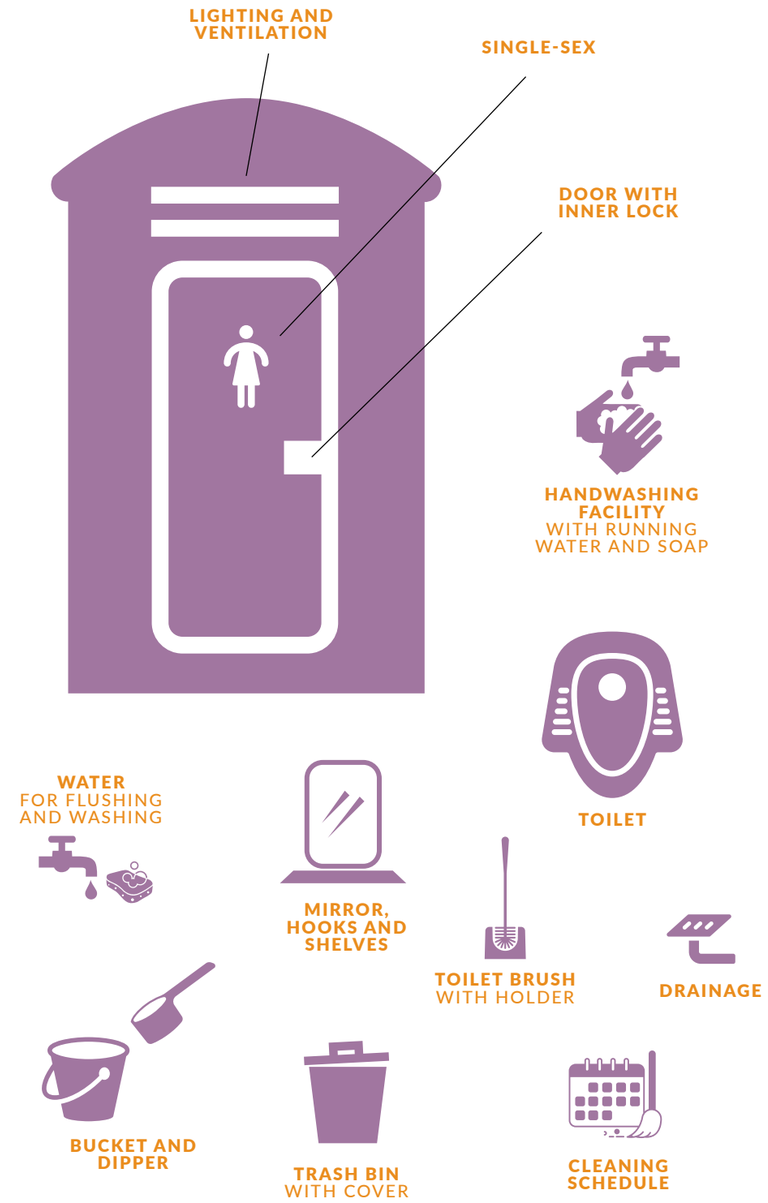
The presence of a separate toilet does not ensure its usage by women and girls. **Investing in the privacy, cleanliness, safety, and availability of water supplies is thus a critical action.** Toilets must have water and soap; toilet must have doors that close correctly, be secured to give additional privacy for women and girls and be well-lit; and facilities must have functional and effective menstrual product disposal facilities. Promoting appropriate hygiene practices in schools can result in increased enrolment rates, fewer absences for girls, and improved gender equality in the classroom. An additional source of water, private latrines, and adequate toilets encourage parents to send their daughters to school, relieving them of the burden of collecting water (Khan, 2022).

Another essential action is the promotion of comprehensive sexual education, especially on puberty and menstruation. This could help girls and boys better understand physical changes, become more aware of socially constructed myths about menstruation, and reduce stigma against menstruation and gender discrimination, which continues to be common (Plan International, 2022).

You can't spell menstruation without men.

FEATURES OF A FEMALE FRIENDLY TOILET

WeWorld elaboration



62 This timing can vary greatly between different countries and between populations, but in general, a lowering of the average age of first menstruation has been observed in recent decades (Khan, 2022).

WEWORLD'S MENSTRUAL HYGIENE MANAGEMENT (MHM) MODALITY

Menstrual Hygiene Management (MHM) is a working method that WeWorld has incorporated into its global WASH (Water, Sanitation, and Hygiene) strategy.

The MHM concept implies that *"Women and adolescent girls using a clean menstrual management material to absorb or collect blood that can be changed in privacy as often as necessary for the duration of the menstruation period, using soap and water for washing the body as required and having access to facilities to dispose of used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear"* (WHO/UNICEF, 2023).

The broader spectrum of menstrual health and hygiene (MHH) complements the definition of MHM, including *"broader systemic factors that link menstruation with health like the well-being, gender equality, education, equity, empowerment, and rights. These systematic factors have been summarized by UNESCO as accurate and timely knowledge, available, safe, and affordable materials, informed and comfortable professionals, referral and access to health services, sanitation and washing facilities, positive social norms, safe and hygienic disposal and advocacy and policy"* (ibid.).

In this way, **menstrual health and hygiene-related activities and programmes serve as a starting point for addressing more significant issues like gender equality and women's empowerment, including crucial issues like sex education, sexual and reproductive health and rights, child marriage, obstetric fistulas, female genital mutilation, and violence in general**. The MHM modality can promote transformative processes so that women and girls can realise their full potential. In fact, these programmes can assist women in learning how to deal with challenges to their development, freedom, and health. Adolescent girls, the women they will become, and the communities in which they live—which can gain from their active and equitable participation—all benefit from investments in their well-being. **Primary and secondary schools, formal and informal education centres, women's protection centres, shelter and relief centres, child healthcare facilities , hospitals, and nutrition centres are a few examples of locations and facilities ideal for the implementation of MHM activities.**

WeWorld employs this method of operation in its initiatives, for instance, in Kenya, Tanzania, Mozambique, Haiti, Syria, Lebanon, Libya, Benin and Nicaragua[63].

63 The principles that inspire WeWorld in implementing MHM activities are: 1) gender mainstreaming, identifying the specific needs of women and girls thanks to their listening and involvement; 2) Education and awareness-raising on the issues of inclusion and gender equality, with awareness-raising activities with all members of society, especially men and boys, to eradicate taboos and gender stereotypes about menstruation; 3) Accessibility to goods and services; removing barriers to accessing menstrual hygiene and health products and services through the distribution of dignity kits and menstrual hygiene kits; building or repairing sanitation facilities; distributing vouchers and cash; 4) Attention to women and girls in vulnerable, crisis, and emergency contexts; 5) Economic and environmental sustainability, preferring products made with local materials, which have a lower environmental impact, produced by community women locally, or reusable products to reduce waste production. 6) Advocacy and lobbying, with local and national awareness-raising activities (public events, festivals, and international days), including institutional ones, to eradicate false beliefs and taboos that still affect menstruation and to spread information and knowledge on the topic.

FROM THEORY TO PRACTICE: THE GENDER AND WASH TOOLKIT FOR PALESTINE

In 2017, as part of the intervention in Palestine[64], the **"Gender and WASH Toolkit"[65] was developed in collaboration with UN Women and the Palestinian Water Authority, a technical tool containing guidelines, recommendations, and best practices aimed at supporting all actors involved in WASH activities throughout the project cycle in the gender mainstreaming integration process.** The toolkit, which is used during the context analysis, concept, implementation, monitoring, and evaluation phases of the activities, includes recommendations on:

- Gender analysis (of stakeholders, current issues, and proposed solutions) is seen as a critical procedure for recognising gender disparities and developing activities that adapt to the requirements of various groups. Gender balance must be ensured within the team throughout the analysis, which must include gender specialists, and all data obtained must be disaggregated by gender and age and analysed in partnership with specialised actors[66].
- Accountability procedures must be ensured during project operations to guarantee that WASH services and activities reach men and women equally and without prejudice. Furthermore, recruiting both men and women in the staff composition is strongly advised to achieve gender balance and training on WASH and gender problems.
- Monitoring and evaluation of results must be carried out by individuals with adequate gender expertise, and the impact of WASH interventions implemented must be measured while taking into account the diversity and variety of perspectives of men, women, girls, and boys (including people with disabilities).

64 For further information on our intervention in Palestine, see page page 86.

65 The document is available at https://www.aics.gov.it/wp-content/uploads/2017/10/WASH-GENDER-TOOLKIT_LOW-RESOLUTION.pdf.

66 UN Women, WASH Gender Cluster Focal Point, local women's associations.

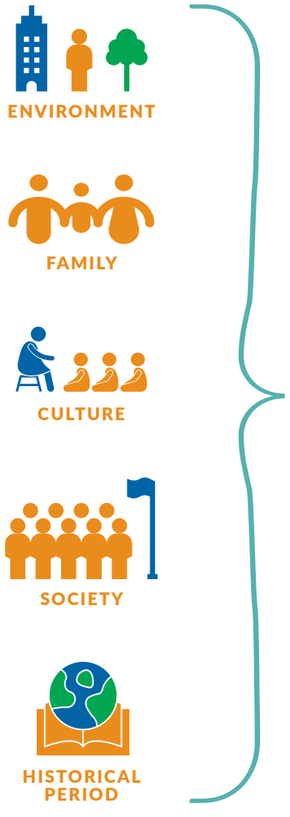
WASH and BEHAVIOURAL CHANGE

Promoting good water-related practices and behaviours through awareness-raising, advocacy, and informative measures, both within communities and with institutions, is the underlying theme of all our initiatives in the WASH sector. This transversal component is present in all the above-mentioned thematic insights and characterises the strategy employed in each geographical area of intervention. Initiating change processes is a common feature in all activities because every intervention, to be long-lasting and sustainable, must always be accompanied by a shift in the community's perspective.

Actions limited to a purely infrastructural or service dimension are doomed to have limited effectiveness and duration over time unless they are accompanied by a higher and more general work that, by involving all members of society, causes a change in the behaviour and approach taken about the good of water and access to sanitation services (WHO, 2019).

Environment, family, culture, society to which one belongs, and historical period all influence behaviour (ibid.). As a result, community participation in the activation of these processes is critical. It is always required to begin with an examination and comprehension of the elements that drive a certain action in a given situation, and then to act specifically on those processes that drive people to adopt the behaviour itself.
Social and behavioural change processes, which can occur across multiple situations (knowledge of good WASH practices, modification of social customs, norms, or sectoral policies), must always be tailored to the reference context, i.e., **provide tailor-made actions calibrated to the specific needs of the population, whose initial needs and perspectives must be understood and mapped.**

One of the cornerstones of any WeWorld's intervention is the people-based participatory strategy, which entails the active participation of communities in awareness-raising and information activities, making individuals multipliers of knowledge and good practices in society. Some broad-spectrum activities, such as the implementation of prevention campaigns in the event of epidemics (for example, COVID-19, typhoid, or cholera), awareness campaigns on water conservation, and environmental protection of natural resources, are common to all WASH interventions; others, however, are designed and implemented in strict accordance with the needs of the reference community.



In these cases, for example, we use "**environmental stimuli,**" such as placing handwashing stations and sanitation services in clearly visible locations or creating paths that allow all users to reach them[67]; we spread messages and good practices aimed at specific subjects, chosen because they have the potential to become future facilitators of the desired behaviour[68]; and we promote fundamental WASH principles through the creation of artistic murals in strategic locations[69]; we provide families and groups of individuals with the tools they need to autonomously maintain sanitation facilities that have been established or restored in the future (as in the case of cash transfer programmes).

In any case, these initiatives always engage, to varying degrees, a large number of recipients (schools, healthcare institutions, families, and local governments) to ensure that meaningful change may occur on a widespread scale within the community.

67 For example, in Tanzania, the sanitation services created in four schools were also made accessible to boys and girls with disabilities thanks to the creation of adequate paths near the school buildings.

68 For example, in Burundi, we implemented training and information activities on good food practices that guarantee correct nutrition for children, which involve mothers and future mothers who, thus, can spread what they have learned within the family and, more generally, in the community.

69 We use this method in schools to make the communication of good WASH practices more immediate and easier to read for children.

KEY FACTS ABOUT WASH AND BEHAVIOURAL CHANGE

- Promoting universal access to WASH requires not only interventions in services and infrastructure but also a change in community perspective and behaviour.
- To be truly sustainable, every WASH intervention must be accompanied by awareness-raising and informational activities on virtuous approaches to water resources and sanitation services.
- Activating change processes in people's perspective and concrete actions is a cross-cutting component of WeWorld WASH interventions. Our approach is people-centred to make the communities protagonists in awareness-raising activities so that they can act as multipliers of the good practices learned.
- On key International Days, WeWorld conducts large-scale information and awareness-raising events, applying its interventions in communities as a starting point to touch on bigger concerns and actively promote the rights of the most vulnerable people.

THE INTERNATIONAL DAYS

WeWorld conducts communication and awareness-raising actions on particular International Days to keep attention (local, regional, and global) focused on the main problems that persist in ensuring the right to water and quality sanitation services for people worldwide.

WASH-RELATED INTERNATIONAL DAYS

International Day of Education	24 January
World Water Day	22 March
World Health Day	7 April
World Earth Day	22 April
Menstrual Hygiene Day	28 May
World Environment Day	5 June
World Food Safety Day	7 June
World Conservation Day	28 July
Zero Emissions Day	21 September
Global Handwashing Day	15 October
World Toilet Day	19 November
World AIDS Day	1 December
Human Rights Day	10 December

UN WATER 22 MARCH WORLD WATER DAY

WORLD WATER DAY

March 22, World Water Day, is a significant occasion to raise awareness about the worldwide water crisis and to recall that the human right to water is still denied to far too many people.

Publishing this Atlas on March 22nd serves as another example of how tools of this sort may help disseminate knowledge and best practices. The final purpose of supplying data and certified sources, system methodologies selected by WeWorld, and WASH sector activities carried out in intervention nations is to provide knowledge, reach an extensive public, and raise awareness about the problem.

Global Handwashing Day
15 October

GLOBAL HANDWASHING DAY

On Global Handwashing Day on October 15, WeWorld emphasises how a simple gesture like washing your hands with soap and water, which is essential for maintaining health and avoiding disease, is regrettably not always within everyone's grasp.

On Global Handwashing Day, WeWorld promotes several initiatives in countries where it operates to bring all of its actions together in a single global appeal: promoting universal hand hygiene. Global Handwashing Day serves not only to remind governments of their commitment to the 2030 Agenda, particularly Target 6.2[70] but also to raise awareness and understanding of the significance of this gesture in disease prevention. We share photographs, infographics, films, and online events with the hashtags **#GlobalHandwashingDay** and **#HandHygieneforAll** to reach the broadest possible audience.
Several of our countries join the appeal, organising special events for the occasion and sharing them through the hashtag:

- In rural Mozambique, soap was supplied, and the basic measures for proper hand hygiene were presented.
- Local and national events were organised in Burundi, including recreational, creative, and dramatic activities with boys and girls, such as the decoration of handwashing stations, television and radio advertisements, and journalist training classes on themes related to good hygiene practices.
- In Cambodia, activities were carried out in schools to illustrate proper handwashing and a competition for children was set up, with a bottle of liquid soap as a reward for those who cleaned their hands appropriately.
- Primary school pupils in Tanzania adorned cisterns with designs of handwashing taps and staged artistic and dance performances.
- In Syria, children and adolescents from four schools participated in handwashing education and training programmes.
- In Libya, we held several public events to target groups of people with different needs and habits: for example, we promoted awareness-raising activities in women's shelters (with a greater focus on MHM), but also in public parks with the creation of graffiti with messages related to the use of water and good hygiene practices; and finally, in schools where we held prize games for children.
- In Moldova, where we work with refugee families fleeing the conflict in Ukraine, we organised educational games on WASH issues in child-friendly spaces.

These are just some examples of activities that have been implemented, but each WeWorld intervention country is committed to promoting activities, meetings and campaigns on the occasion of Handwashing Day.

MENSTRUAL HYGIENE DAY

WeWorld, along with other institutions and civil society organisations, participates in **Menstrual Hygiene Day every year, an awareness event held on May 28 to break the silence and promote the critical role that adequate menstrual hygiene and health play in enabling women and adolescents to reach their full potential.** In recent years, the Menstrual Hygiene Day campaign has urged increased action and investment in menstrual health and hygiene, mobilising around the hashtag **#ItsTimeForAction.** However, in 2023, the hashtag was replaced by **#WeAreCommitted** to highlight efforts aimed at creating a society in which no one is discriminated against because they menstruate by 2030.

On this day, WeWorld outlines its initiatives in places where menstruation is frowned upon and a lack of infrastructure and cheap hygiene supplies for women and girls effectively inhibits their ability to engage fully in communal life. In this context, in addition to preventive initiatives, direct support, and economic empowerment, we have conducted awareness campaigns through events and material dissemination on local media and social networks, raising public knowledge of gender issues.

Our country office in Nicaragua has been a pioneer in this sense. For several years, our local staff has been organising multi-channel activities and campaigns on the topic and a fully-fledged fair on MHM to combat taboos and stereotypes about menstruation.

WeWorld has consistently advocated for the abolition of the tampon tax in Italy. As a result, we started the **#FermaLaTamponTax (Stop the Tampon Tax) campaign** in 2020. The campaign had a positive reaction, and numerous MPs supported WeWorld by proposing revisions to the 2021 Budget Law. As a result of this, the Tampon Tax was cut to 10% and subsequently to 5% in 2023. However, the debate is still open. With the 2024 Budget Law, which restored VAT to 10%, we relaunched our campaign on social media, emphasising that menstruating is not a luxury.

70 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.

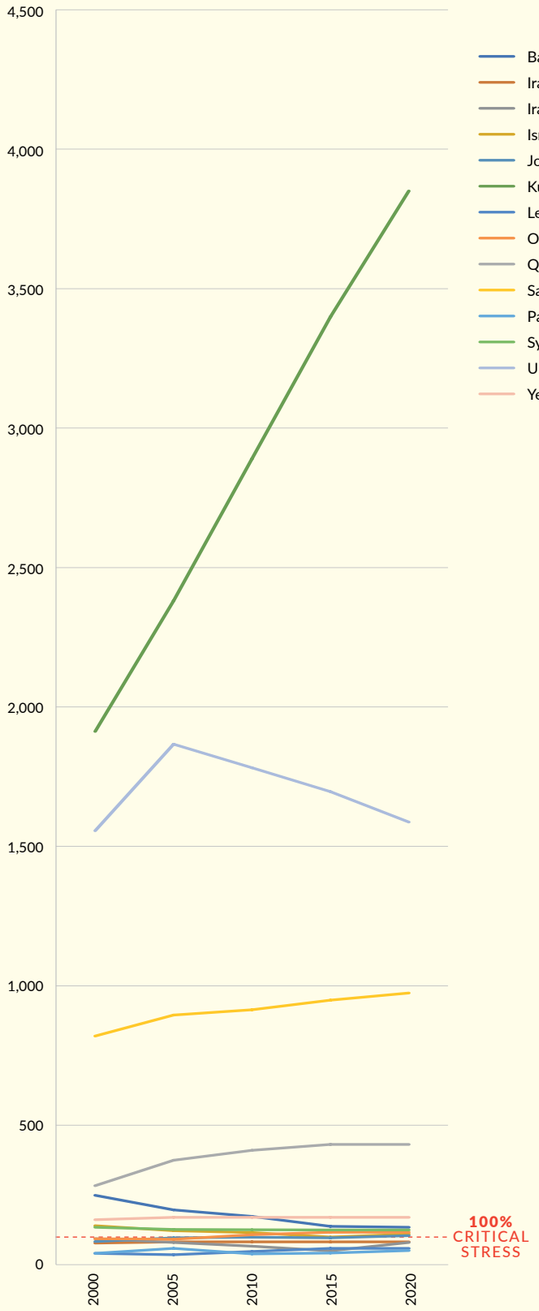
WASH in the MIDDLE EAST

© WeWorld

Overview

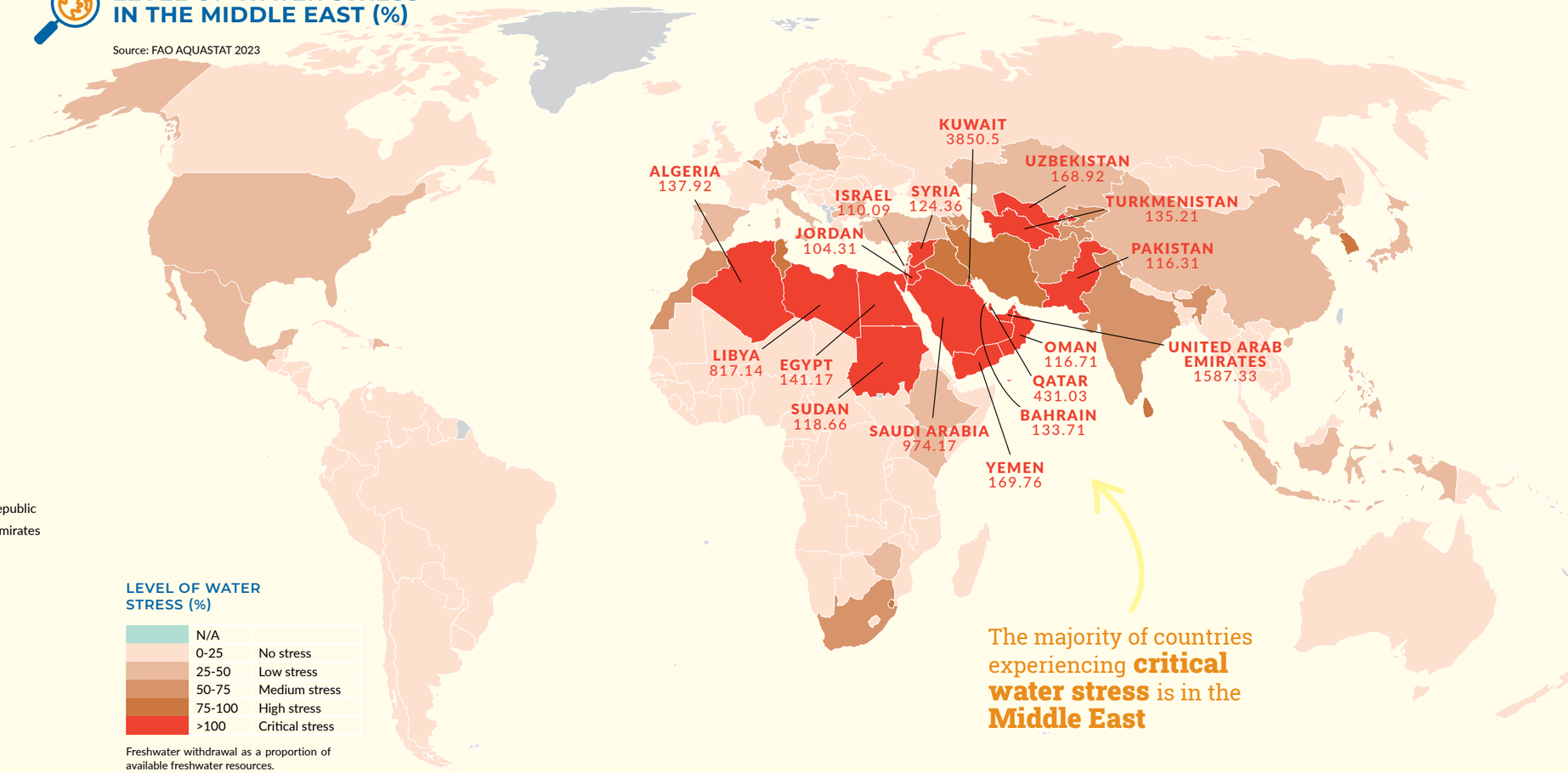
WATER STRESS IN THE MIDDLE EAST (%)

Freshwater withdrawal as a proportion of available freshwater resources. Data is updated to 2020. Source: FAO AQUASTAT 2023. The classification of the geographical areas responds to WeWorld elaboration.



LEVEL OF WATER STRESS IN THE MIDDLE EAST (%)

Source: FAO AQUASTAT 2023



The majority of countries experiencing **critical water stress** is in the **Middle East**

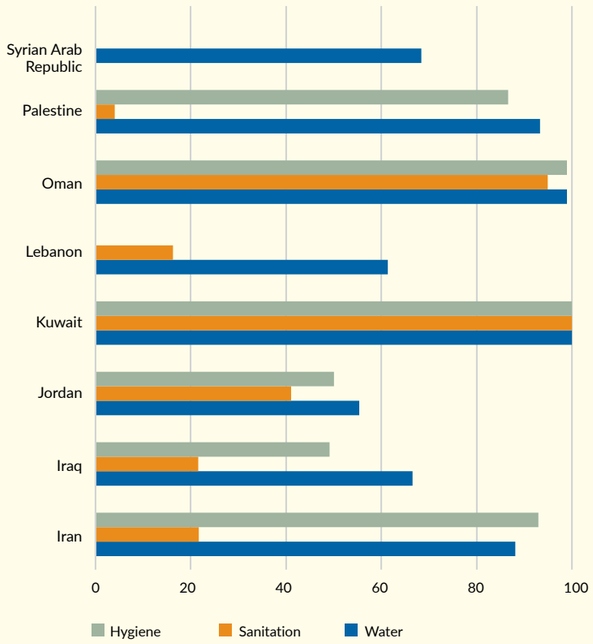
PEOPLE WITH ACCESS TO BASIC WASH SERVICES IN PROTRACTED CRISES (%)

Data is updated to 2022. Source: WHO/UNICEF 2023.

	SYRIA			PALESTINE			YEMEN		
	WATER	SANITATION	HYGIENE	WATER	SANITATION	HYGIENE	WATER	SANITATION	HYGIENE
2000	91.60	88.44	-	90.65	90.34	-	40.88	45.24	-
2001	91.74	88.59	-	91.05	90.39	-	41.11	45.55	-
2002	91.88	88.75	-	91.45	90.44	-	41.34	45.86	-
2003	92.02	88.90	-	91.86	90.50	-	42.60	46.52	-
2004	92.16	89.06	-	92.26	90.98	-	43.77	47.17	-
2005	92.30	89.40	-	92.66	91.46	-	44.93	47.63	-
2006	92.43	89.74	-	93.06	91.94	-	46.08	48.08	-
2007	92.56	90.09	-	93.46	92.42	-	47.21	48.51	-
2008	92.70	90.43	-	93.85	92.91	-	48.33	48.94	-
2009	92.82	90.77	-	94.25	93.39	-	49.44	49.35	46.99
2010	92.95	91.10	-	94.65	93.86	-	50.53	49.75	47.19
2011	93.00	91.37	-	95.04	94.34	-	51.61	50.14	47.38
2012	93.05	91.63	84.20	95.44	94.82	-	52.67	50.52	47.58
2013	93.11	91.91	84.13	95.76	95.30	-	53.72	50.88	47.79
2014	93.17	92.19	84.06	96.07	95.78	94.93	54.76	51.23	47.99
2015	93.32	92.55	84.11	96.38	96.25	94.93	55.78	51.57	48.20
2016	93.46	92.90	84.15	96.69	96.73	94.93	56.79	52.10	48.40
2017	93.60	93.26	84.20	96.99	97.21	94.93	57.78	52.62	48.61
2018	93.74	93.61	84.24	97.29	97.68	94.93	58.75	53.13	-
2019	93.87	93.96	84.28	97.59	98.15	94.92	59.72	53.63	-
2020	94.00	94.30	84.33	97.88	98.63	94.92	60.66	54.12	-
2021	94.05	94.64	84.37	98.17	>99	94.92	61.60	54.60	-
2022	94.08	94.98	84.42	98.44	>99	94.92	61.76	54.84	-

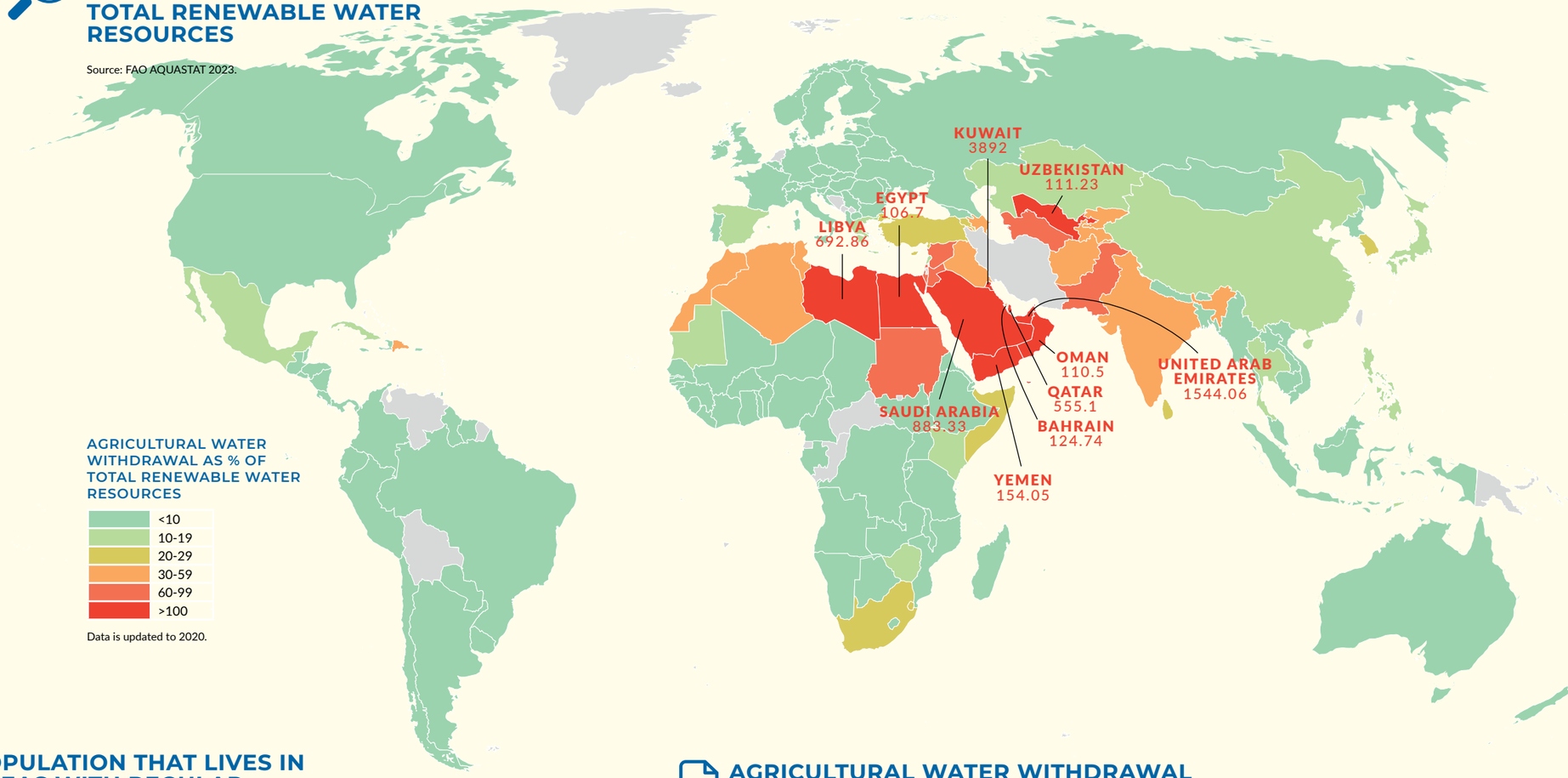
HEALTHCARE FACILITIES WITH SAFELY MANAGED WASH SERVICES (%)

Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



AGRICULTURAL WATER WITHDRAWAL AS % OF TOTAL RENEWABLE WATER RESOURCES

Source: FAO AQUASTAT 2023.



Data is updated to 2020.

PEOPLE WITH ACCESS TO SAFELY MANAGED WASH SERVICES (%)

Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.

COUNTRY	WATER	SANITATION	BASIC HYGIENE
Bahrain	98.90	92.23	>99
Iran	94.22	-	-
Iraq	59.74	52.77	97.39
Israel	>99	96.25	-
Jordan	85.71	82.34	-
Kuwait	>99	>99	-
Lebanon	47.70	25.67	-
Oman	90.85	-	-
Palestine	80.33	70.11	94.92
Qatar	96.65	>99	-
Saudi Arabia	-	79.92	-
Syrian Arab Republic	-	-	84.42
United Arab Emirates	-	98.46	-
Yemen	-	19.16	-

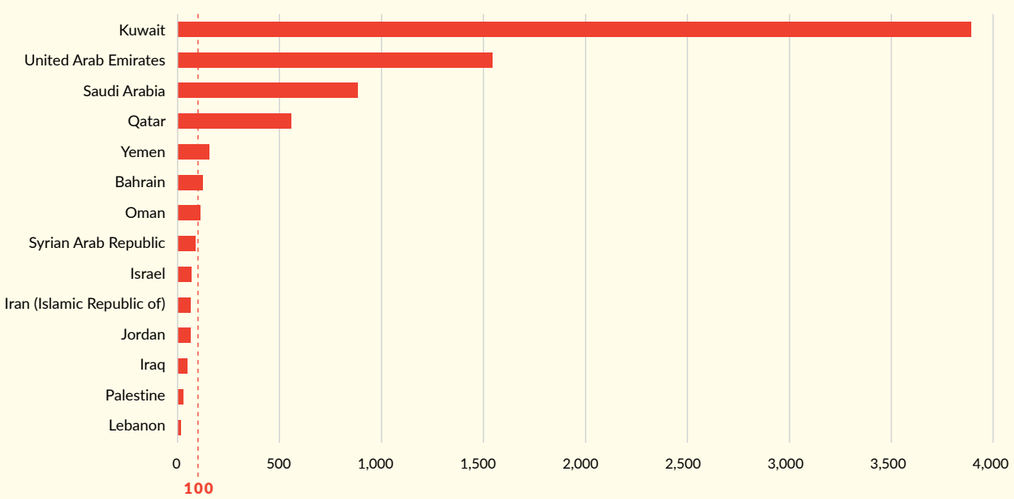
POPULATION THAT LIVES IN AREAS WITH REGULAR OPPORTUNITIES FOR PUBLIC ENGAGEMENT IN WATER RESOURCES MANAGEMENT (%)

Data is updated to 2021. Source: GLAAS/WHO 2023.
The classification of the geographical areas responds to WeWorld elaboration.

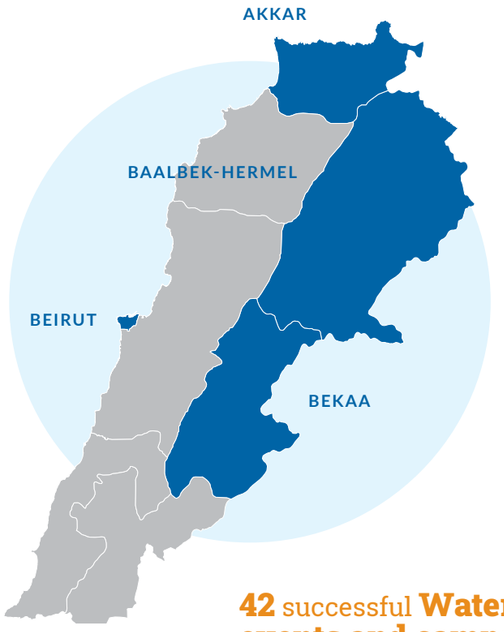
COUNTRY	URBAN	RURAL	NATIONAL
Iran	Between 50 to 74%	Between 95 to 100%	Between 50 to 74%
Iraq	Less than 50%	Less than 50%	Less than 50%
Jordan	Between 50 to 74%	Between 50 to 74%	Between 50 to 74%
Kuwait	Between 95 to 100%	Between 95 to 100%	Between 95 to 100%
Lebanon	Less than 50%	Less than 50%	Less than 50%
Oman	Between 50 to 74%	Between 50 to 74%	Between 50 to 74%
Palestine	Between 75 to 94%	Between 75 to 94%	Between 75 to 94%
Syrian Arab Republic	Less than 50%	Less than 50%	Less than 50%
Yemen	Between 75 to 94%	Less than 50%	Between 50 to 74%

AGRICULTURAL WATER WITHDRAWAL AS % OF TOTAL RENEWABLE WATER RESOURCES IN THE MIDDLE EAST

Data is update to 2020. Source: FAO AQUASTAT 2023. The classification of the geographical areas responds to WeWorld elaboration.



WASH in Lebanon



OUR ACHIEVEMENTS BETWEEN 2020-2023

25km of irrigation canals constructed and rehabilitated to increase water access for more than **500 farms** in North Bekaa

205 environmental grants distributed to promote water, land, and energy management efforts, supporting initiatives with an environmental impact or an input cost reduction for farmers

42 successful **Water Conservations Awareness events and campaigns** conducted (WaterWise trainings, World Water and Global handwashing Day celebration, etc.)

3 water development projects implemented in Bekaa and Baalbek-Hermel

193,505 individuals (152,850 Host Community, 40,655 Syrian Refugees) reached

55km of **water network lines** (pumping, transmission & distribution) constructed/ rehabilitated

7 deep **boreholes** drilled, cased and positively tested

56% water service subscription rate achieved in the pilot localities

11 fully equipped **water-pumping stations** constructed and /or rehabilitated

Hygiene kits, food packages and menstrual hygiene vouchers distributed to vulnerable households

632 families reached (5,300 people, of which 1,620 marginalised girls and women)


© Diego Ibarra Sanchez/WeWorld

FRAMING THE CONTEXT

WeWorld has been working in Lebanon since 2006. Political and economic insecurity in the nation limits livelihood opportunities and generates vulnerabilities and disparities.
Water availability is jeopardised by flaws in public sector management and organisation, which have been exacerbated by the Syrian conflict since 2011. Water scarcity in Lebanon is worsening due to inadequate service providers and poor resource management, while the influx of Syrian refugees has significantly increased water demand.
Furthermore, Lebanon has been confronted with the most devastating and comprehensive crises of its modern existence for nearly four years. The economic and financial crisis that began in October 2019 has been considerably aggravated by the concurrent economic ramifications of the COVID-19 pandemic and the massive detonation at the Port of Beirut in 2020. The country is now dealing with skyrocketing inflation, widespread unemployment, and a severe shortage of basic necessities, all of which exacerbate social unrest and overburden the already inefficient public institutions, which are unable to provide essential public services such as electricity, water, and waste collection.
Even though nearly the entire population (93% of households) has access to basic drinking water services in 2023, less than half of the population (48% in both rural and urban areas) has access to properly managed drinking water and water free of pollutants. 2 out of every 3 public healthcare facilities (66%) have poor sanitation, and 18% has no sanitation at all (WHO/UNICEF, 2023). It is critical to solve water shortages, ageing infrastructure, and resource mismanagement to minimise social tensions and promote effective and sustainable public water administration.

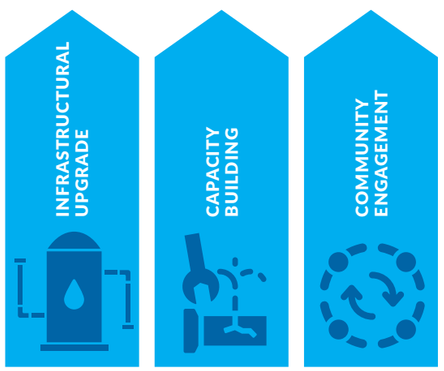
SECTORS OF INTERVENTION

Public water governance is strengthened, becoming effective, participated and sustainable through infrastructural upgrades, capacity building and communities' engagement.

Interventions for potable water, sanitation, and irrigation required the initial step of enhancing public services. The government's 4 Regional Water Establishments (WEs) setup in 2000 are not completely functioning, limiting the ability to maintain roofing systems and effective distribution[1].

As a result, comprehensive, development-focused programming with a strong emphasis on user-utility mutual accountability is required. To eradicate inequities, however, efficient resource management and infrastructure measures must assure a stable and sustainable supply of water services to both Syrian refugees and the host population. To do this, **a three-pillar strategic approach is adopted,** based on:

1. **Infrastructural upgrade** of water production, storage and distribution facilities (through their rehabilitation and expansion) to improve service delivery. This way, water systems' capacity was improved, and water waste was reduced.
2. **Capacity building** for water utilities operators, through the provision of staffing, equipment, and training to the Water Establishments' local offices, with a special focus on Non-Revenue Water (NRW) reduction[2]. This bottom-up approach fostered the reliability of the service and reduces families' dependence on expensive private sources.



1 With the 2000 Water Law, the Government established WEs to strengthen the provision of the service and entrust the management of the policy to the Ministry of Energy and Water. However, WEs have not been entirely implemented, partially because of a lack of funds.

2 Non-Revenue Water is pumping water which either leaks back into the ground or is pumped but gets lost or is unaccounted for. For this reason, it represents not only a financial waste but also an environmental problem.

3. **Community engagement** by improving access to information for users and local authorities and by promoting accountability and mutual trust between Water Establishments and residents. Communities have been involved in planning processes that guaranteed public services to be more suited to their requests and understood the need to contribute to the management and operating costs of the public service. Such engagement allowed for water accountability and spread awareness on the responsibilities that each stakeholder (residents, municipalities and water utilities) had in the overall water management.

Moreover, through the **EL-SICR methodology** (Establishment-Led Service Improvement & Cost Recovery)[3] Water Establishments were put on the lead of the water service improvement. This approach:

→ Upgraded water utilities' visibility towards users.

→ Maximised the degree to which external assistance was routed by and through public utilities rather than private contractors.

→ Provided a high degree of flexibility in case of crisis or collapse.

The EL-SICR component has been introduced in 4 Regional Water Estabilshments and 3 "Maintenance & Distribution" sections, specific departments in the Water Estabishments responsible of the equitable supply of water in terms of pressure, flow and quantities at the level of the subscriber. In addition, the "Maintenance and Distribution" sections should be responsible for the bulk quantities of water produced for a certain locality versus the number of Cubic Meters sold by the WE[4].

3 Technical approach which keeps water schemes functional through calibration, effective operation and maintenance. Through its application WEs immediately respond to maintenance and troubleshooting needs through trained seconded engineers supported by: means, resources and guidelines provided by partners which WEs' local teams to plan for, as well as perform, this expansion of capacity and effectiveness; consolidation of the procurement procedures, lessons learned, benchmarks, and cost benefit analyses by partners, to advocate for adoption of this internal delegation model at scale and the incentivization mechanism of existing staff at the section level.

4 Under this new Capacity Building modality, the sections of the Water Establishments: were supported with personnel, equipment, and technical coaching to undertake the testing and maintenance of water distribution networks. They could assess and design technical solutions (infrastructure upgrade, pressure regulation, illegal connections removal) that they will implement directly or by employing contractors and/or municipalities where necessary. Also, they supervised the infrastructure improvement works, as well as respond to maintenance and troubleshooting needs under their jurisdiction. Moreover, they were supported to improve their effectiveness and increase their field presence.

Local economic development is promoted. Public institutions capacity is enhanced. Food insecurity is reduced, and farmers' access to water for agricultural production and land management resources is improved.

To alleviate regional tensions, economic development must be established with a focus on participation and inclusivity. To mitigate the negative socioeconomic consequences of multiple crises for both refugees and host communities, and to lay the basis for sustainable development, it is essential, on the one hand, to ensure immediate food security and livelihoods in the short term, and, on the other hand, to increase the resilience of local economy in the long term. To do this:

→ **25km of irrigation canals were targeted through building of earth canals, restoration of existing concrete canals, and wall extensions**[5]. This will increase water access for more than 500 farms in the region by improving water flow through the canals; it will also offer temporary job possibilities for unskilled and skilled people through the adoption of an intensive-labour mode of implementation.

→ **More than 200 environmental grants were distributed to promote water, land, and energy management efforts.** A grant system was developed at the farm level to support initiatives with an environmental impact or an input cost reduction for farmers, such as the installation of water-efficient irrigation systems, aquifer recharge (terracing, rainwater harvesting, small-scale hill lakes), renewable energy (micro solar or wind systems to reduce the use of pumped water and CO2 emissions), and soil management techniques.

→ **8 municipal grants** will be awarded to projects that have been suggested and validated by the community and will be submitted by the municipality.

→ **Municipalities were given support in developing and carrying out participatory municipal development plans.** The activities centred on encouraging participatory approaches, training local actors in conflict resolution, and establishing local economic development plans that bring together public institutions and individuals in search of a shared vision for the region's long-term local development.

→ **632 families (5,300 people) received hygiene kits and food packages** (dry food parcels, fruit and vegetable baskets, or both, depending on their needs). **Household support also included the delivery of menstrual hygiene vouchers to 1,620 marginalised girls and women** over two cycles, for three rounds of fresh food distribution every two months.

5 Two types of canal linings classified based on the nature of the surface: earth in the first case and concrete in the second case.

THE VOICE OF

Michel Samaha

Project Manager for Water Development for WeWorld in Lebanon

"Lebanon is currently facing significant challenges and a complex set of crises. The economic situation remains dire, with a deteriorating currency, high inflation, and a staggering debt burden. The country's financial system is strained, and access to necessities such as water, electricity, and fuel is becoming more and more limited. Widespread poverty and unemployment persist, leading to growing social unrest and protests. The political landscape remains fragmented, hindered by a lack of effective Governance and ongoing political disputes. As a result, both rural and urban inhabitants face serious challenge in obtaining equitable and sustainable water supply.

With Lebanon experiencing an increasing water scarcity due to the plethora of challenges affecting the water sector (including the heavy burden of refugees), water-related interactions between stakeholders is expected to become even more complicated. The Bekaa region, constituting 43% of the total area of Lebanon, is in many aspects a microcosm of the challenges and opportunities in the water sector in Lebanon. Today, lessons learned are about how to collaborate with public authorities (water establishments and ministries) to negotiate agreements with social enterprises or civil society organizations to Manage, Operate & Maintain the existing water schemes. The innovative element is about turning a weak central water authority into decentralised functional utility providers. Such solution will safeguard the previously constructed water facilities and maintain a minimum decent service to the subscribers."

WASH in Palestine

OUR ACHIEVEMENTS BETWEEN 2020-2023

WeWorld has become a member of the **Strategic Advisory Board** of the WASH Cluster and has established and led the WASH in Health Working Group

WASH services in **17 healthcare facilities** in Gaza and the West Bank were enhanced

10 schools rehabilitated and their WASH facilities improved

111 water cisterns, 3 community reservoirs and 180 water tanks constructed or rehabilitated

271 household facilities (kitchen and bathroom) were rehabilitated and connected to water and wastewater systems

13 kits of water facilities critical operation and maintenance materials and tools were distributed

7 solar systems, 3 for electricity purposes and 4 for water purposes, were installed

3,494 cubic meters of trucked water were provided to unserved vulnerable communities

10 kilometres of rural roads rehabilitated

1,603 hygiene kits were distributed

FRAMING THE CONTEXT

Since 1992, WeWorld has been present in Palestine, where one of the most critical issues is accessing WASH services. In Palestine, less than 40% of households has access to safely managed water (UNICEF, 2023a). When considering sanitation services, conditions are even more critical: just over 1 in 3 people has access to sanitation facilities where excreta are safely disposed of in situ, 38% with wastewater treated, 35% with latrines and others and 12% with septic tanks (WHO/UNICEF, 2023).

In the West Bank[1], restrictions against water supply and sanitation facilities are reflected in the WASH sector's chronic vulnerability. In 2020, per capita water consumption amounted only to about 26 litres per person per day, while the minimum amount recommended by the World Health Organisation is 50-100 litres. Only 36% of Palestinians in the West Bank have daily access to running water all year. Another 47% receive running water less than 10 days every month (B'Tselem, 2023). While restricting Palestinian access to water, Israeli authorities have effectively developed their own water infrastructure and water network in the West Bank for the use of its own citizens in Israel and in the settlements – which are illegal under international law.

In the Gaza Strip, even before the war, the water sector situation was particularly critical, undermining the water security for over 2.1 million inhabitants suffering from a water supply that was limited in quantity and of poor and deteriorating quality due to seawater intrusion in the coastal aquifer, hampered by persistent environmental, climate, and socio-economic issues, including increasingly frequent droughts, population growth, infrastructural challenges (obsolete pipelines and huge losses) According to the Palestinian Water Authority (PWA), the estimated amount of non-revenue water (NRW) in GS in 2018 amounted to 35.7 million cubic meters, representing a loss of 37.6% of the total supplied water (Pedron et al, 2021).

1 The Oslo Accords divided the Palestinian West Bank into three administrative zones: Area A (18% of the WB), Area B (22%) and Area C (60%). Area A is under Palestinian administrative and police control, and, of the 3 areas, is the most densely populated. Although under Palestinian control, much of the available land for building lies on borders with Area C, which is controlled by Israeli authorities. Area B is under the administrative control of the Palestinian Authority that shares security control with Israel. Most Palestinians in the West Bank live in areas A or B, but these areas are not contiguous because Area C divides them into hundreds of separate segments. An estimated 300,000 Palestinians live in 532 residential areas located partially or fully in Area C, along with some 400,000 Israeli settlers residing in approximately 230 settlements.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THE EMERGENCY IN GAZA

The already challenging situation has worsened as of October 2023, both for West Bank and Gaza. The Gaza Strip now grapples with catastrophic water, sanitation, and hygiene needs essential to the survival of its 2.3 million inhabitants, of whom half are children. **Currently, only 5% of the population's water needs are being met, with people subsisting on just 1-3 litres a day for all purposes – a figure significantly below the Sphere emergency** standard **of 15 litres per person per day**. This lack of water also impedes sanitation services, which are already strained due to damaged sewage systems, deteriorated infrastructure and limited staff. Disastrous sanitation conditions worsened by the lack of solid waste collection and water consumption from unsafe sources elevate the risk of disease, especially chronic diarrhoea among children (UNICEF, 2023b). More than 60% of the water and sewage networks in Gaza City and the northern Gaza region will require significant reconstruction and rehabilitation.

Almost 5 months of siege and bombardments have severely impacted the whole WASH services and the health sector, with **only 12 out of Gaza's 36 hospitals functional, albeit partially,** as of March 2024 (OCHA/WHO, 2024). Moreover, overcrowding and poor sanitation have led to the **spread of communicable diseases**, including diarrhoea, respiratory infections, skin conditions and lice, and Hepatitis A, that is spreading in the internally displaced people's camps and shelters.

THE VOICE OF

Giovanni Pedron,
Emergency Coordinator, Gaza

"The humanitarian situation in Gaza remains catastrophic. Almost 5 months of war since October 7th have cost the lives of 30,000 Palestinians in Gaza whereas more than 71,000 have been injured, half of them are children. The nutrition crisis in northern Gaza is rapidly deteriorating: 21 children have so far died as a result of malnutrition and dehydration, according to the Ministry of Health in Gaza. The humanitarian aid that can be provided to the population is just "a drop in the ocean", as the humanitarian agencies are facing severe limitations in delivering basic aid. Despite immense difficulties and a pervasive sense of injustice, WeWorld staff in Gaza, who are also displaced and depleted from the conflict, have proudly and effectively supported the response to the crisis with immediate life-saving interventions, primarily focusing on Water, Sanitation and Hygiene".

One million women and girls have been forced to leave their homes (UN Women, 2023); many of these are **facing severe health risk as they must deal with personal hygiene and menstruation in the absence of menstrual products, water and sanitation facilities, privacy and healthcare**.

In Gaza, WeWorld is engaged in a humanitarian intervention to support access to safe WASH services, addressing lifesaving needs. WeWorld team is intervening in Rafah, Khan Younis, Middle Area and partially in North Gaza:

- → A total of **4638 cubic meters of drinking water and 1650 m3 of domestic water have been distributed** through water trucking in all the Gaza Strip Areas.
- → Distribution of Non-Food Items and Bottled water is ongoing.
- → **Water tanks and bladders have been installed** in overcrowded IDP sites to ensure minimal hygiene standards, alongside the **provision of family hygiene kits and dignity kits.**
- → An emergency toilet construction programme with handwashing points is ongoing in unserved IDP sites lacking sanitation facilities: **93 emergency sanitation units have been constructed.**
- → Environmental cleaning and solid waste collection activities are ongoing in several IDP shelters, including 8 schools and 3 hospitals, to prevent the spread of epidemics and vectors in overcrowded areas.
- → A hygiene and health promotion campaign is currently targeting the IDP population, emphasizing preventive measures against waterborne diseases and other health-related issues.
- → A cash-for-work programme related to emergency toilet construction, garbage collection, and hygiene promotion activities is being implemented to provide support to the most vulnerable IDPs who currently lack other sources of income.

As a partner of the WASH Cluster, WeWorld is actively monitoring and coordinating with other actors.
Lastly, WeWorld keeps calling for **an immediate and lasting ceasefire**, to allow for the safe movement of people and goods inside the Gaza Strip.

SECTORS OF INTERVENTION

Public water governance is strengthened, becoming effective, participated and sustainable through infrastructural upgrades, capacity building and communities' engagement.

In Palestine, our WASH governance interventions are articulated into 3 sub-sectors:

WASH and COMMUNITY-RESILIENCE

WASH and CLIMATE

WASH and HEALTH

NON-CONVENTIONAL WATER PROGRAM:

- → The **wastewater treatment plant in Beit Dajan**, serving a total of 4,460 inhabitants[2], **has been operationalized** thanks to the rehabilitation of technical components with an innovative compact treatment module of the plant, and the installation of smart irrigation systems and networks, enabling the reuse of treated wastewater.
- → In Beit Dajan (Nablus Governorate), dialogue and collaboration between farmers and local institutions on reuse of treated wastewater (TWW) **and the setting up of a Farmer User Association (FUA)** have enhanced the governance of TWW.
- → Local capacities on non-revenue water (NRW) and Non-Conventional water reuse and sustainable water management, also at household level, have been strengthened through both **the development of a tailored and intensive training programme and awareness raising campaigns**. In Beit Dajan, for example, a study on the perceptions of reuse of Treated Wastewater in agriculture has been held, including awareness on the use in agriculture.
- → Rural communities' resilience has been enhanced by **building or rehabilitating water reservoirs, cisterns, wells and springs and extending irrigation pipelines**, increasing access to water sources, both for human consumption and cattle farming. In addition, **trainings on organic and sustainable farming practice**s have been given to link smart use of water with sustainable agriculture practices. To ensure connections between communities and improve the transport of water and goods, **10 kilometres of rural roads have been rehabilitated**[3].

NON-REVENUE WATER REDUCTION PROGRAM:

In October 2020, WeWorld launched the Gaza H2.0 initiative to establish sustainable water management in Khan Younis Municipality, spearheading the endeavour to enhance the operational practices in the targeted municipality to reduce non-revenue water. The initiative concentrated on the investigation of the domestic water distribution system's efficiency with a mapping exercise and the segmentation of the network into 23 smaller District Metered Areas (DMA). Therefore, with noticeable findings, the Gaza H2.0 initiative achieved:

- → **A scientific study in collaboration with Technical University of Berlin, that has defined and divided the water distribution system of Khan Younis into 23 DMAs**: the investigation of the water distribution system's efficiency and mapping exercise began in October 2021, validating nearly 430 kilometres of pipes, and assessing 36 water wells and 8 water tanks.
- → The completion of a **hydraulic modelling report** in December 2022, which identified that **NRW in Khan Younis exceeds 38% of the annually produced water.**
- → The establishment of the **NRW Unit** in Khan Younis, in coordination with the KYM, Coastal Municipality Water Utility (CMWU) and the PWA.
- → The realization of 14 days **DMA capacity building training** for 84 key local technicians and stakeholders.
- → The creation of a SWAN Task Force encompassing PWA, CMWU, the NRW unit of Khan Younis and local key stakeholders.
- → **Capacity building and awareness raising events** for Civil Society Organisations and citizens in Khan Younis on water management and misuse, costs and regulations.

2 Data refers to Arpa Project *"Rehabilitation of water facilities in the occupied Palestinian territories"*, implemented in 2021.

3 Data concerning the *"Better access to water for disadvantaged Palestinian rural communities"*, implemented from 2019 to 2020. More information available at: https://www.weworld.it/en/what-we-do/global-projects/better-access-to-water-for-disadvantaged-palestinian-rural-communities.

WATER QUALITY

WeWorld, in coordination with PWA, CMWU and the WASH Cluster, before the war was developing a **mapping tool for monitoring the quality of the water distributed by CMWU and the Gaza Strip Municipalities (GSM)**. It was evaluated the urgent need for a comprehensive mapping of the water supply zones and their water quality status, to assess the existing vulnerabilities along the supply chain in the Gaza Strip. This water quality mapping shall have enabled PWA and CMWU on the development of scenarios for an optimized, equitable and safe water distribution, combining conventional groundwater with unconventional water sources. The main activities planned are:

- → Rounds of the water quality sampling and testing for a total of 1500 samples, considering 8 parameters (including on Nitrate, pH, Total Dissolved Solids, EC, Chloride, Residual Chlorine, Total Coliforms and Faecal Coliforms) for identified water distribution zones, will be performed by CMWU with WeWorld's supervision, based on the strategic water sampling points identified through the zoning map.
- → Development of a digitalized and colour-coded water quality mapping for existing water distribution zones. WeWorld will process the water test results to develop color-coded maps through the support of the Consultant.
- → Elaboration of an IT web dashboard, showing and updating the results of the water quality mapping with colour-coding.


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Sustainable water, sanitation and hygiene are supplied in healthcare facilities and schools to ensure quality care services and health, safe environment in education facilities and decent WASH facilities for the most vulnerable.

Poor water quality and **hygienic and sanitary conditions increase the risk of spreading diseases such as diarrhoea**. In **healthcare settings,** having adequate WASH services is essential for a proper infection prevention and control (IPC), that can help prevent and reduce the spread of healthcare-associated infections. To strengthen WASH and IPC in healthcare facilities (HCFs), mainly in the Gaza Strip:

- → **Desalination plants have been installed** in HCFs to provide safe water, make water heating systems more sustainable.
- → Targeted HCFs have fostered the capacity to ensure lower infections rates **improving solid waste management and providing IPC protocols. With** capacity building through coaching and mentoring of (para)medical staff[4] accompanied by the distribution of **Personal Protective Equipment (PPE) for health workers.**
- → In Al-Shifa hospital in Gaza Strip, **the installation of a biological wastewater treatment plant improved the operations of the sewage system, preventing highly risk wastewater to contaminate the neighbourhood and therefore reduce the public health risk.**
- → **Awareness raising events with local communities on good practices regarding IPC** have been organized. Furthermore, **hygiene kits have been provided** to patients and their families, including essential items specific for women, such as menstrual health materials.
- → **National standards[5] on minimum WASH requirements HCFs** including hospitals, clinics and mobile clinics have been developed, together with UNICEF and the Ministry of Health. WASH services in 17 healthcare facilities (Hospitals and Primary Healthcare Clinics) in Gaza and the West Bank, of which 2 main hospitals in Gaza (Al Shifa, and Indonesian), have been enhanced, including provision desalination plants and structural internal/external rehabilitation.

In **education facilities** the presence of accessible and inclusive WASH facilities guarantees a safe environmental for students and teacher and is crucial to the health and education of children, addressing issues around dignity, particularly for girls:

- → To prevent the spread of infections among children and teenagers, 10 schools have been rehabilitated including improving their WASH Facilities, and **hygiene kits have been distributed in schools.** In addition, **students have participated in hygiene awareness sessions,** which included interactive messaging through games for the youngest children.

The **most vulnerable families**, living under the poverty lines, often are the ones who pay the higher price in terms of health conditions, as they cannot afford to have proper WASH facilities at home:

- → To improve their living condition and well-being, **271 household facilities (kitchen and bathroom) have been rehabilitated and 89,005 meters of water supply system (pipelines) for domestic use have been installed.**

THE VOICE OF

Adel Rebeia Ghanmi Abu Rejal,
Gaza Strip's Al-Shoka region

"I live in an agricultural area of the Gaza Strip, with my wife and my eight children. One of them, Samir, suffers from chronic heart failure and requires constant and expensive medical treatments, for which he needs to visit a hospital in the West Bank every six months. Another one suffers from a chronic respiratory disease and needs antibiotics. Our income comes mainly from my occasional labour in farming and limited government provisions, making it challenging to cover the considerable medical expenses required for my sons. Additionally, our house had an asbestos ceiling that lacked essential water and sanitation facilities, including very poor condition of the kitchen, the bathroom, and the sewer network, causing us a perpetual state of hardship. Fortunately, in March 2023, we got a call informing of our selection as beneficiaries of the WeWorld "Strengthening WASH Approaches to Improve Nutritional Status Among Families in the Gaza Strip". The intervention met our most urgent needs, which was the rehabilitation of the kitchen and bathroom, creating safer and more comfortable living environment, that had helped us a lot. We started sitting in the kitchen eating and we were not afraid of insects, we had privacy thanks to the installation of a bathroom door, and had access to quality nutritional and health services, including treatment for my son Samir, who had undergone open-heart surgery".

4 These activities have been mainly implemented by our partner Juzoor for Health and Social Development, a Palestinian non-governmental organization.

5 The document "*National Standards for WASH in Healthcare Facilities in the State of Palestine*" is available at: https://www.unicef.org/sop/reports/national-standards-wash-health-care-facilities.

A gender approach and inclusion operational tools are implemented to make WASH services safe, adequate and equitable for all.

Access to WASH is related to obligations undertaken by women in Palestine because they are the ones accountable within the family for providing the fundamental requirements of its members. Women have unique demands during menstruation, pregnancy, and delivery, which, if not met, can have a significant impact on their living conditions, health, and well-being. **The lack of access of potable water, proper menstrual hygiene and private and secure bathrooms increases the risks of gender-based violence in the communities**. Lastly, women are the major users of health care services as well as the primary carers for family members. For these reasons, any WASH improvement endeavour must take women's needs and viewpoints into account, implementing suitable and gender-sensitive WASH initiatives and services. To accomplish this:

- → **The "Gender & WASH Toolkit for Palestine"**, a technical instrument aimed at supporting WASH actors through practical guidance, recommendations, and good practises on how to mainstream gender in WASH programming and projects **was developed**[6].
- → In context analyses **gender-disaggregated data was collected, as well as gender social norms that might influence differently women, men, boys, girls and people with disabilities** in their ability to access WASH services, in their level of participation, in their access to information, etc. (for example, the access to the land as a property for single women or widows).
- → **Both men and women, boys and girls and people with disabilities have been regularly consulted,** considering their different concerns, needs and rights, to ensure an equitable access to water and sanitation services and that their rights are effectively met[7].
- → **In the design and rehabilitation of WASH facilities in schools, such as bathrooms and toilets, a gender sensitive approach was adopted**, with a focus on promoting integrity, dignity and privacy and preventing possible gender-based violence.
- → In targeted **schools, awareness-raising sessions on menstrual hygiene** have been conducted with girls.

6 To read the document: https://www.aics.gov.it/wp-content/uploads/2017/10/WASH-GENDER-TOOLKIT_LOW-RESOLUTION.pdf

7 This is the core of WeWorld's CPA (Community Protection Approach), introduced in Palestine in 2013 and implemented in 14 countries as of 2021, which consists of a unique action-oriented approach and methodology enabling the design and monitoring of integrated protection programming. It aims to work together with women and men of all ages with or without disabilities, to make informed decisions about their safety and to develop local strategies to self-analyse risks and related vulnerabilities in WASH and other sectors, organizing their resources and efforts to reduce exposure to harm.

WASH and GENDER EQUALITY

WASH and CHILDREN'S RIGHTS

WASH and HEALTH

WASH and BEHAVIOURAL CHANGE

THE VOICE OF

Annelise Herman,
WASH Officer, Palestine

"Unequal power dynamics between men and women are traditionally present in Palestine. Men and women have certain roles in decision making and control on resources including in access to water. Lack of access to basic WASH services impacts the life of women more than men in Palestine, as in most communities (both in West Bank and Gaza), women (and children) are traditionally the ones tasked with fetching water, cleaning of the house and hygiene. Men have some responsibilities in WASH, such as constructing latrines or fetching water with small trucks at filling points, but they are still less involved. Talking about menstrual hygiene, especially with men, is still taboo in Palestine. There is a need for more women empowerment in the WASH sector, even if over the past few years, improvements have been made at least at national level. In the face of this situation, in 2018, WeWorld with the support of AICS, developed the WASH and Gender Toolkit on gender issues and how to mainstream Gender in WASH interventions, an instrument to promote women participation and gender equality in WASH sector".

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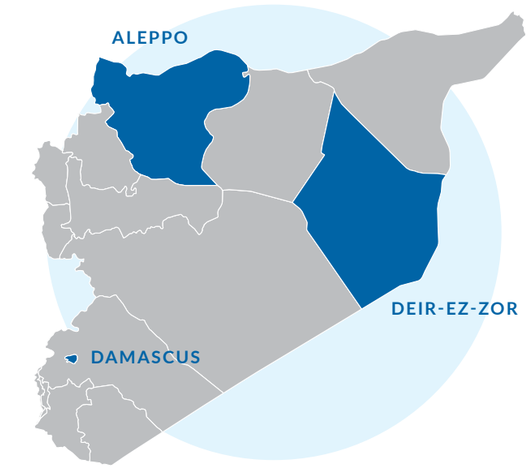
WASH in Syria

OUR ACHIEVEMENTS BETWEEN 2020-2023



135 WASH facilities rehabilitated in schools

Total recipients of WASH actions: **1,193,163 people**

129,000 individuals and 20,000 children in schools benefited from **awareness raising campaigns**

3,135 Hygiene kits, **1,835 Menstrual Health Management kits** and **5,300 Cholera kits** were distributed

9 pumping stations and **3 elevated water reservoirs supported** with rehabilitation and/or equipment

More than **20,000 children** received **students' kits**

153 water network spot repairs in over **20 neighbourhoods**

4 technical trainings organised for **Local Water Boards**

Water network rehabilitation in **7 locations** connecting more than **28 communities** to water

FRAMING THE CONTEXT

Since 2011, WeWorld has been present in Syria, where 13 years of protracted crisis[1] have created and exacerbated large-scale humanitarian needs around water, sanitation, and hygiene (WASH). Currently, an estimated 42% of the country's population relies on alternative and often unsafe water sources to meet or complement their water needs, and at least 70% of the discharged sewage is untreated. In addition, two-thirds of water treatment plants, 50% of pumping stations, 25% of sewage treatment plants, and one-sixth of wells have been damaged (UNICEF, 2023c).

1 According to UNHCR (2024), Syria crisis remains the largest displacement crisis in the world, with over 12 million Syrians forcibly displaced in the region.

SECTORS OF INTERVENTION

The school system guarantees equitable, inclusive, and safe access to learning environments through WASH services and facilities.

In Syria, **there are currently 6.5 million people in need of emergency education services**, **15% of whom are living with a disability**. Since the beginning of the war, 7,000 schools have been damaged or destroyed, and, particularly in rural areas, schools are experiencing a lack of furniture and supplies, and inadequate availability and quality of WASH facilities (UNICEF, 2022b). Making WASH services accessible and inclusive at school improves educational opportunities and addresses dignity-related issues, especially for girls and children with disabilities. To do this:

- → **More than 110 schools have been renovated**[2] with facilities made accessible for people with disabilities (at least 1 toilet accessible), by removing toilet architectural barriers and **providing WASH facilities sensitive to gender** (making sure to guarantee access to gender-separated toilets).
- → Considering climate change issues, **110 target schools have been provided also with storage tanks, and more than 10 solar systems,** avoiding use of fuel for pumping water and giving secure and sustainable access to students and teachers.

2 Data below concerns the project "*Inclusive education and income-generating opportunities for building-up resilient communities in underserved areas of Aleppo and Deir-EzZor governorates*", carried out by WeWorld in 2021. More data is available at: https://www.weworld.it/en/news-and-stories/news/promoting-an-inclusive-education-in-syria.

THE VOICE OF

Bakri,
*47 years old, Aleppo**

"The morning of the earthquake was catastrophic for my family, especially as we have 6 children. The lining situation here has become very hard. The assistance provided by the organization came at the right time, but we need more."

*Testimonial collected by WeWorld

WASH and CHILDREN'S RIGHTS

WASH and GENDER EQUALITY

WASH and BEHAVIOURAL CHANGE

- → **Activities related to menstrual health and hygiene, such as the distribution of 1,835 menstrual hygiene kits and the organisation of menstrual health sessions**, have been implemented to foster the well-being and empowerment of women and girls.
- → Teachers, students and citizens have been made aware of the importance of hygiene and equitable and inclusive access to WASH facilities in schools to promote inclusive education, through **awareness-raising campaigns training for more than 2,450 teachers.**
- → **Schools and children's resilience to crisis and knowledge of hygienic practices have been improved** by organizing awareness-raising initiatives using games, drawings and songs to better involve children, distributing WASH supplies, hygiene and cleaning kits, and organizing hygiene and health promotional activities, such as door-to-door visits with parents. These initiatives have reached more than 128,671 individuals.

Water Service Providers support the population through the reconstruction, rehabilitation, and maintenance of water systems, ensuring water availability and quality in the most vulnerable areas.

→ **Syria's water system has suffered from extensive infrastructure damage, inadequate capacity for operation and maintenance, the loss of skilled technical staff, and a lack of access to electricity.** Inadequate infrastructures are particularly susceptible to natural and health emergencies, as happened with the cholera outbreak declared in September 2022, causing 173,345 suspected cases, including 105 deaths, reported across all 14 governorates (OCHA/WHO/UNICEF, 2023); and the earthquake of February 2023, when relevant damages undermined the provision of water, especially in rural areas. These recurrent epidemics and outbreaks amid the severely deteriorated living conditions and protracted crisis, are posing a high risk for public health. To address these emergencies:

→ **12 water infrastructures have been restored**, including pumping stations and reservoirs, along with the **rehabilitation of 160 malfunctioning points**[3] of 48 water networks in the hardest hit areas, **reaching more than 1,193,163individuals in need in more than 70 communities in Aleppo, and 5 communities in Deir Ez Zor.**

→ **At least 40,212 people** (38% of whom are children) **have been supported after the earthquake** through the distribution of drinking water, for a total of 737,000 liters, and hygiene materials, including **3,600 packs of baby diapers, 600 packs of elderly diapers, 1,835 family hygiene kits and 1,835 dignity kits**.

→ Community resilience has been improved through **capacity building training to technical staff of the Water Board (water service provider)** needed to enhance its operational and infrastructure maintenance capacity. Totally 30 people have been trained.

→ To tackle climate change effects and the consequent lack of resources, around 140KWH solar systems have been installed at pumping stations to enable them to operate without fuel, ensuring water supply for 5 to 6 hours per day with sustainable energy. Rehabilitating these networks had two effects: the first is to provide water to those who previously did not have access and had to rely on dangerous sources of water via water trucking, and the second is to reduce water losses due to leaks, hence lowering non-revenue water. **Overall, 6 networks serving 28 communities have been rehabilitated or constructed.**

→ During the cholera epidemic in Deir er Zor, **12 schools and 4 health facilities have been provided with safe and monitored water via water trucking for 3 months to meet the requirements of 5,740 pupils.** Furthermore, 5,300 households have received cholera prevention kits and awareness sessions for cholera prevention.

3 Data below refers to our intervention strategy following the earthquake that struck Syria in February 2023. More information at: https://www.weworld.it/en/news-and-stories/news/syria-earthquake-weworld-in-the-field-for-first-aid.

THE VOICE OF

Nahla,

*58 years old, Aleppo**

"During the earthquake, we could not leave the house because of my mother and sister's conditions. I also had to quit the job. When I came here to receive the kit, I was very happy because the prices have risen a lot, and for a long time I could not buy any type of cleaning products."

*Testimonial collected by WeWorld

Empowerment and self-development of communities are promoted using participatory tools, such as awareness-raising initiatives and community mobilizers.

After thirteen years, Syria is still a divided country, separated into areas controlled by different forces, and without a state that can respond to the people's necessities. The multifaceted crisis creates continuous cycles of vulnerability, strongly impacting population's livelihood and access to WASH services, which are frequently unavailable, especially for the most disadvantaged and marginalised groups, exacerbating inequalities: **in 2024, 16.7 million people are assessed to need humanitarian assistance, of which 5.5 million are displaced** (OCHA, 2023a). Given the increasing complexity of this scenario, it is essential that the humanitarian response focuses not only on achieving immediate results that meet the emergency needs of the population, but also on long-term and sustainable results. Therefore, **our WASH approach is based on the use of participatory tools, which promote population's empowerment and self-development, to make the community itself agent of endogenous change processes.** For this purpose:

→ Communities participated in awareness-raising initiatives aimed at stimulating behavioural change not only on issues related to correct hygiene and health practices that promote optimal well-being, but also on natural resource protection and what actions to take to properly store safe water and how to avoid water wastage. In the period 2020-2023, **129,000 people took part in awareness sessions and activities.**

→ Behavioural change processes have been initiated through a continuous presence in the community with an area-based approach thanks to **trained community mobilizers.** The methodology followed the International Federation of Red Cross and Red Crescent Societies (IFRC) community-based health and first aid CBHFA methodology in coordination with SARC (Syrian Red Crescent). Throughout, **health committees have been created and supported** through activating monthly meetings where waterborne and hygiene challenges and progress are discussed. This aims to **keep the health committee active even beyond the duration of the project, so that communities can be empowered and made aware of their status in terms of access to WASH services and can advocate for improving it.**

THE VOICE OF

Ali Mounzer,

WeWorld's Programme Manager, Syria

"In Syria, WeWorld focuses its interventions within the WASH sector under a holistic approach, ensuring safe access to water by intervening at the source level, distribution, storage, and consumption. In parallel, WeWorld is supporting the Water Boards through training on operation and maintenance, improving the overall management of water supply systems. Moreover, WeWorld can actively play a role in two aspects: firstly, mapping WASH services and enhancing the complementarity of interventions in the WASH sector within the same community. This supports the development of multi-year programming, not only for WeWorld but also for other WASH partners working in the same area. Secondly, community engagement and empowerment of local health committees can help them solve WASH issues in the absence of humanitarian organizations: through WeWorld's ongoing community engagement strategy, in a context where access to information and beneficiaries is limited, communities can be empowered and made aware of their status in terms of access to WASH services and can advocate to improve it. Even WASH interventions in schools are designed in such a way that, at the end of the intervention, the recreational/games items are left to the school so that the teachers (who are also trained in hygiene practices) can continuously carry out these activities with the children even after WeWorld's intervention."

THE VOICE OF

Fatima,

*22 years old, Aleppo**

"I don't know to this day if my life is real or it's just a nightmare. However, I'm happy today because I was able to get help from the distribution and it will ease me and my father a little, in light of the harsh living conditions in which we live."

*Testimonial collected by WeWorld

WASH in AFRICA

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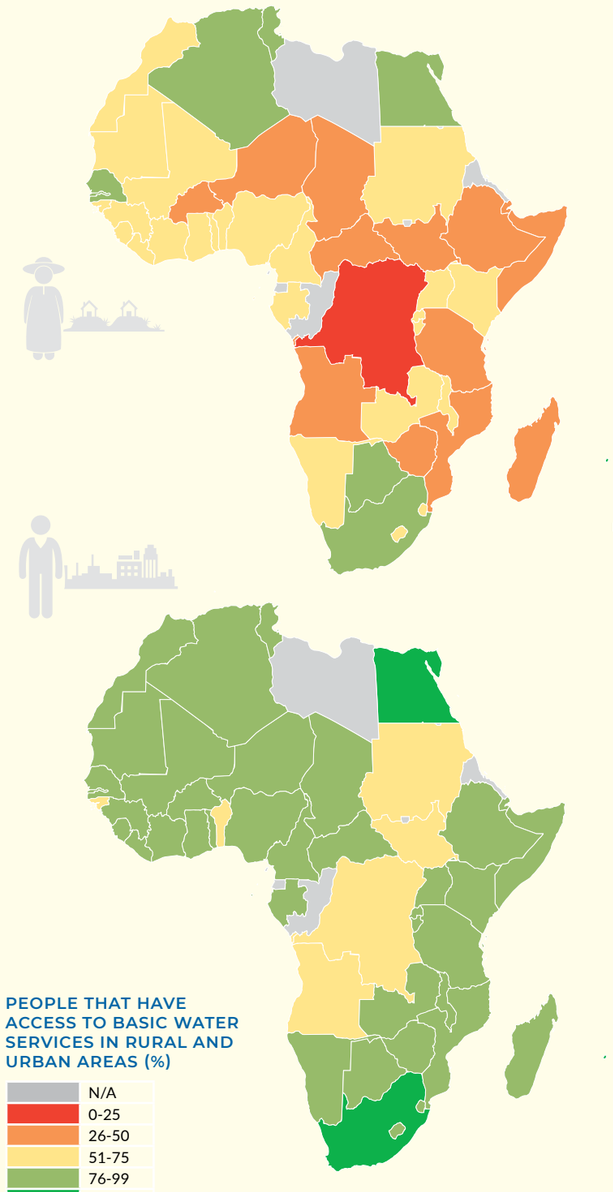
Overview

PEOPLE THAT HAVE ACCESS TO BASIC WATER SERVICES IN RURAL AND URBAN AREAS (%)

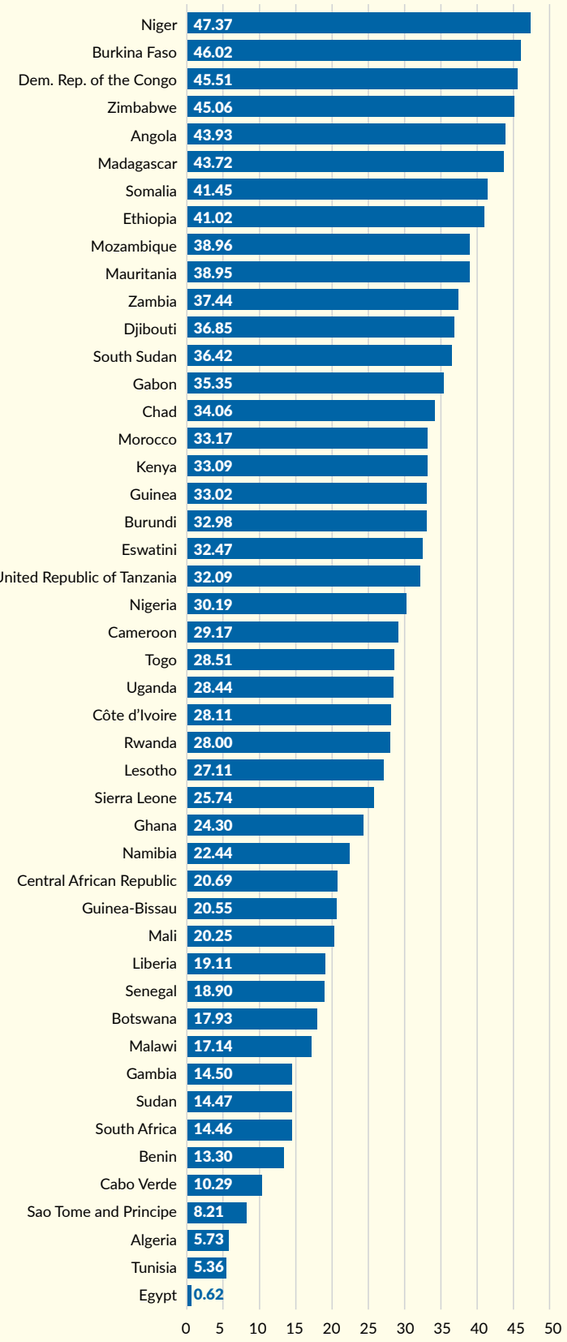
Source: WHO/UNICEF 2023.



Data is updated to 2022. The classification of the geographical areas responds to We-World elaboration.

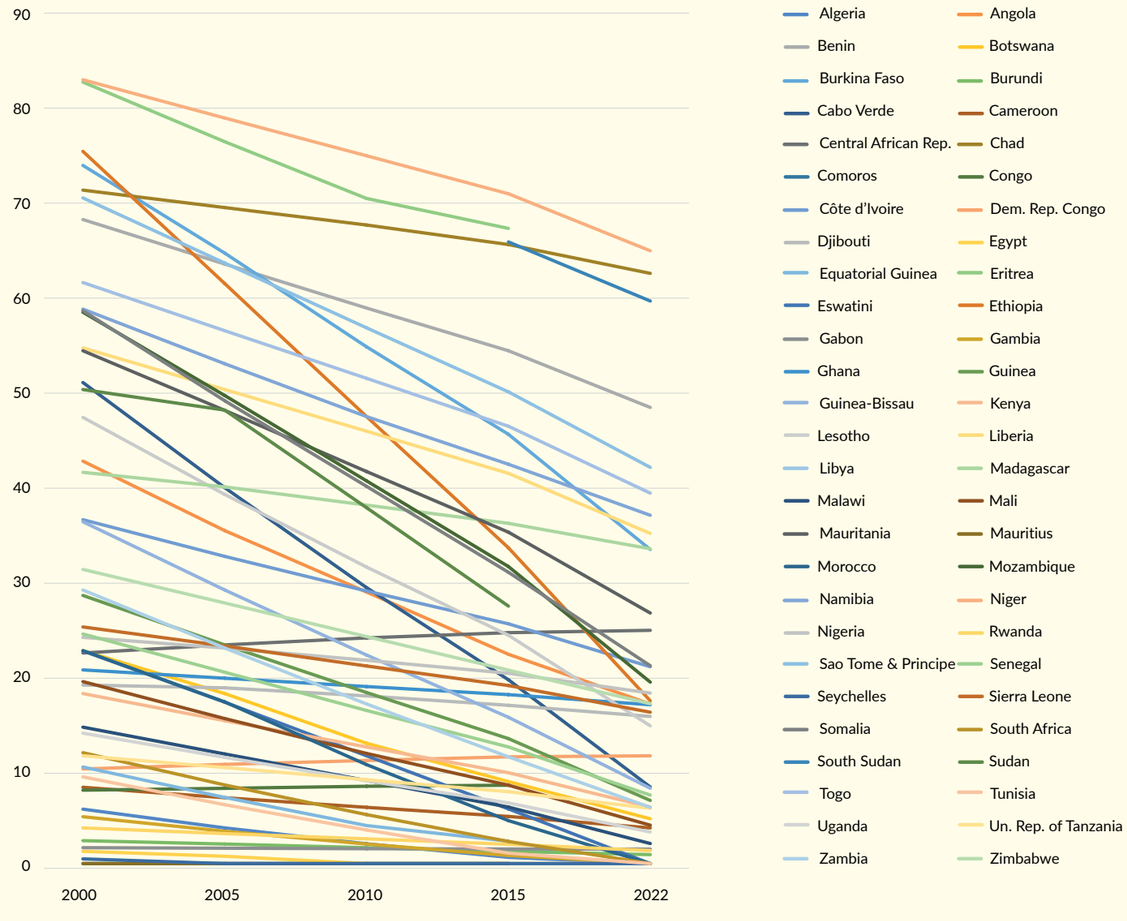
DIFFERENCE IN ACCESSING BASIC WATER SERVICES FOR URBAN AND RURAL POPULATION (%)

Data is updated to 2022 and refers to the difference in access to basic water services between people living in urban areas and those living in rural areas. The higher the percentage value, the higher the differences between the populations. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



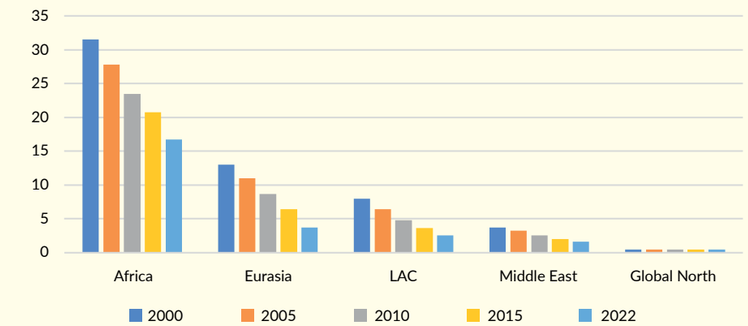
PEOPLE FORCED TO RESORT TO OPEN DEFECATION IN AFRICA, 2020-2022 (%)

Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



PEOPLE FORCED TO RESORT TO OPEN DEFECATION, REGIONAL AVERAGES 2000-2022 (%)

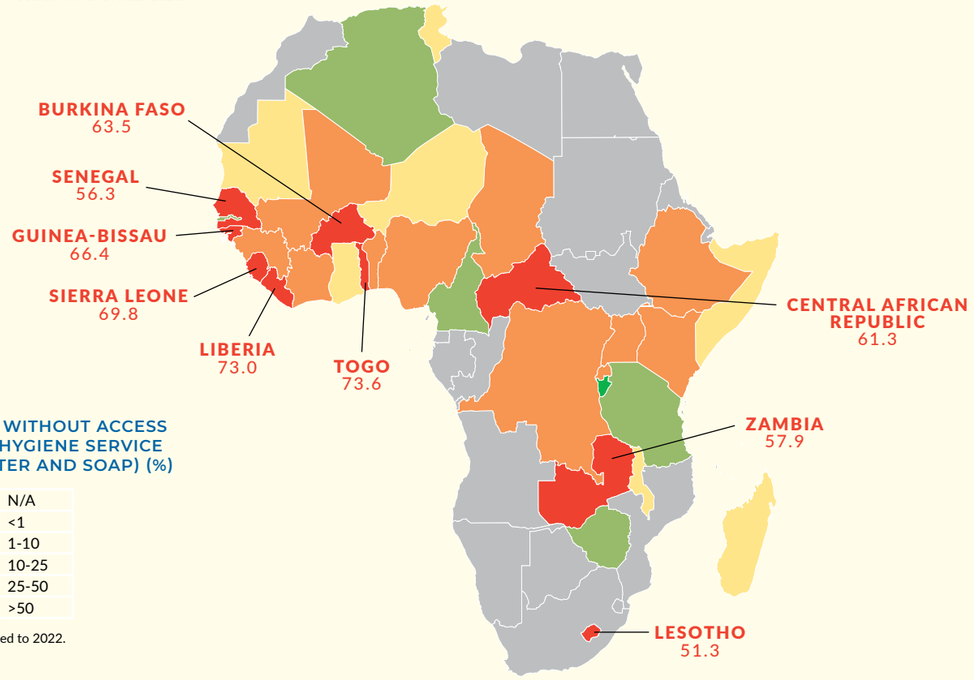
Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



Africa is the continent with the **highest percentage** of people forced to resort to **open defecation**

PEOPLE WITHOUT ACCESS TO ANY HYGIENE SERVICE (NO WATER AND SOAP) (%)

Source: WHO/UNICEF 2023.



Data is updated to 2022.

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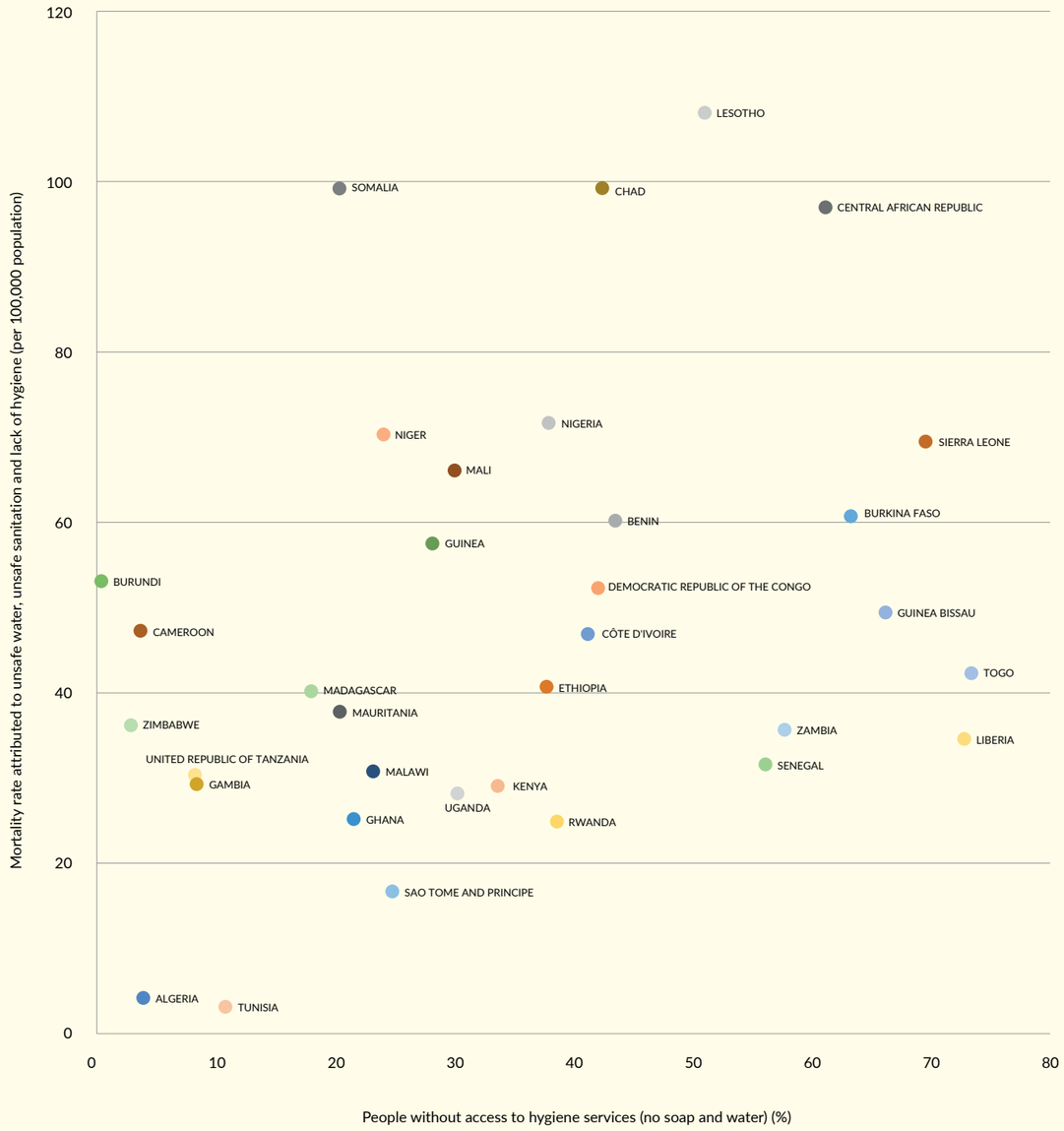
CORRELATION BETWEEN PEOPLE WITHOUT ACCESS TO HYGIENE SERVICES (NO SOAP AND WATER) (%) AND MORTALITY RATE ATTRIBUTED TO UNSAFE WATER, UNSAFE SANITATION AND LACK OF HYGIENE (PER 100,000 POPULATION)

Source: WHO/UNICEF 2023 - WHO 2020.



WASH in Benin

OUR ACHIEVEMENTS BETWEEN 2020-2023

39 awareness-raising sessions on sexuality, gender-based violence, sexual and reproductive health and rights carried out

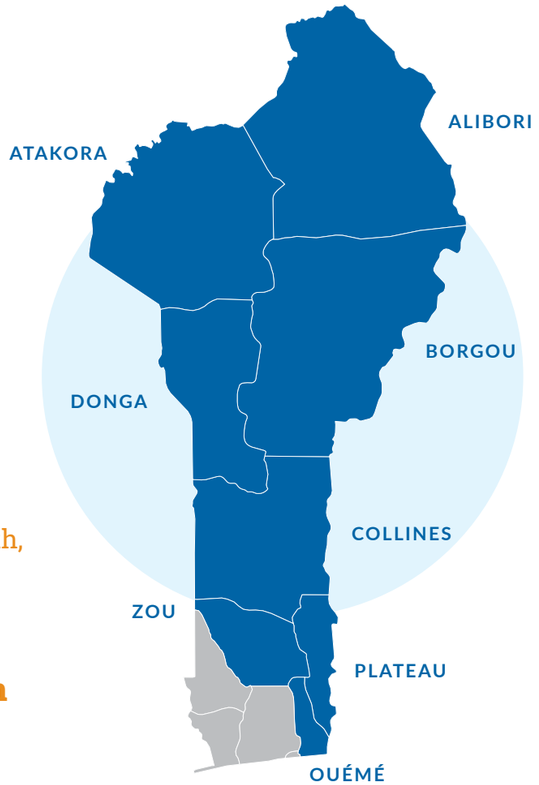
349,354 people reached between youth, teachers and parents

25 school buildings built/renovated

14,012 children reached

1 awareness-raising **campaign on deparassitation**

7,000 children involved



FRAMING THE CONTEXT

WeWorld has been operating in Benin since 2008. The effects of climate change, such as floods and delayed rainfalls, rising costs, children's economic exploitation and the consequences of the COVID-19 pandemic are all threatening the country. These conditions impact on the quality of life of the population, making it more vulnerable to food insecurity and malnutrition, which disproportionately affect children and have become one of the leading causes of child mortality and morbidity. Furthermore, a lack of micronutrients might influence pre-school-age children's school performance.
Children's right to health and education is not guaranteed when they are in school: as of 2023, just 43% of national schools has access to basic water service, while more than one-third (37%) has restricted water service and 21% has no water service at all (WHO/UNICEF, 2023).

THE VOICE OF

Olympe Dossa,
Programme Director for WeWorld in Benin

"In 2020, communities had to face all the fears, stresses and consequences that the COVID-19 pandemic had on their daily lives. This period has led every actor in the community to become aware of the importance of hygiene.
We carried out awareness-raising activities in the target areas via local radio broadcasts, which informed communities about good water management practices as well as the importance of simple gestures, such as handwashing, which has proved to be crucial to prevent the virus and to limit its spread so as not to endanger everyone's lives.
Moreover, we trained women in community groups on the production of handwashing devices, tippy tap and liquid soap, which has allowed hundreds of families to benefit from the use of such device at home and to practice handwashing as recommended during the health crisis."

SECTORS OF INTERVENTION

School systems and community mechanisms are strengthened to ensure that children's rights to education, a complete and balanced diet and health are guaranteed.

The country's educational quality and school environment are both deficient and primary school attendance in many rural areas remains below 50% (World Food Programme, 2023). Children's school performance is harmed by a general dissatisfaction with their dietary needs: according to the most recent data, **1 child under five years old out of every 3 (32%) suffers from chronic malnutrition** (ibid.). Numerous constraints must be addressed to protect children's rights to health, education, and growth. To do so:

- → **14,983 children** (of which 1,362 in pre-primary school) **received a quality and inclusive education in 25 schools** from 25 different rural communities, thanks to the construction and renovation of school buildings; the pedagogical training and supervision of 383 teachers and 156 principals for the effective adoption of New Teaching Programmes; and the organisation of modules of civic and rights education through innovative methodologies (such as the constitution of reading circles).
- → **20 teachers (2 per school) have been selected to form a focal point** and trained on children's health, nutrition and growth monitoring, participating in a two-day training each year.
- → Internal reports were used by schools to monitor children's nutritional situations, and meals cooked with high protein and vitamin-enriched flour were served to pre-primary school children to meet their nutritional needs.
- → **Access to water for 3,5000 primary and pre-primary school children was improved** through the construction of drilling and drinking water connection infrastructure" con grassetto fino a improved.
- → **Deparassitation awareness campaigns have been carried out in the targeted schools, reaching 7,000 children,** and malnutrition screenings have been carried out for children aged 5 to 7.
- → Cooking demonstrations for children using local products with high nutritional values were organised.
- → **Hygiene in school and community environments was promoted through the establishment of one children's club** in charge of carrying out awareness-raising activities in each school: the implementation of a two-day training of children, teachers, community members, and "community catalysts"[1] **on good hygiene practices; and the provision of one hygiene kit in each school (handwashing devices, baskets, toilet cleaning material).**
- → The establishment of school gardens, managed by children from the hygiene club, was encouraged.
- → Each community conducted annual awareness-raising campaigns on children's rights and sexual and reproductive health using participatory methodologies, as well as campaigns on health prevention, intestinal worm treatment, and child growth monitoring with the assistance of local healthcare facilities).
- → **Each community established a child protection mechanism, the Child Protection Committee,** whose members (schoolteachers and principals, members of school committees, pedagogical advisors, and community leaders) received training on children's rights and fundamental freedoms.
- → With the establishment of one Basic Community Organisation, responsible for nutrition in each village, and the organisation of one or two-day training for those responsible for the stock of flour and the preparation of hot meals in pre-primary schools, both schools and communities promoted good nutrition practices.
- → **A total of 180 emergency funds has been established for families in need** who have been identified as particularly vulnerable within the 10 rural communities involved.

WASH and CHILDREN'S RIGHTS
WASH and HEALTH
WASH and INCLUSION
WASH and BEHAVIOURAL CHANGE

1 High-profile people in the community who have the task of boosting and supporting the process of behavioural change within the community itself.

WASH in Burkina Faso

OUR ACHIEVEMENTS BETWEEN 2020-2023

31,000 people received **cash assistance**

1,497 households benefited from the development of **urban micro-gardens**

650 hectares of land recovered for **agricultural use**

799 people able to work thanks to the **"Cash-for-Work" modality**

FRAMING THE CONTEXT

Since 1985, WeWorld has been present in Burkina Faso, where, for about 8 years, the security situation has gradually deteriorated, leading to a major humanitarian crisis characterised by the proliferation of non-state armed groups in the border area with Mali and Niger and the entire northern part of the country. The intensification of conflicts is threatening lives and livelihoods, peace and social cohesion. Moreover, the situation is exacerbated by other vulnerability factors, as limited access to drinking water and basic sanitation, the effects of climate change and the chronic malnutrition rates, among the highest in Africa and worldwide (15% of children under 5 years suffers from it).

As of 2022, for example, there were 1,761,915 internally displaced people; 4,900,000 people in need of humanitarian aid, including 2,842,000 children; 197 healthcare facilities not functioning and 408 functioning at a minimum level. In addition, 21% of the population used water supplies accessible on-premises and 56% when needed, only 9% of rural and 12% of the urban population had access to safely managed sanitation, while only 10% of the population used improved sanitation facilities (excluding shared) (WHO/UNICEF, 2023).

SECTORS OF INTERVENTION

Local population enhance resilience to food insecurity by adopting sustainable ways of agricultural production and practices to reduce malnutrition.

In Burkina Faso, it is estimated that **nearly 480,000 children under 5** have been exposed to **acute malnutrition** nationwide between October 2023 and January 2024. In addition, **130,000 pregnant and lactating women were expected to be acutely malnourished in this period** (IPC, 2024). To counter this condition, it is essential to provide support for food and necessities, stabilising local agricultural production by reclaiming degraded land, promoting endogenous crops and boosting agricultural production. For this purpose:

- → **Cash assistance was provided to around 31,000 people** in the town of Djibo (Province of Soum) to purchase food and essential goods.
- → **Kits, including food and non-food items** (including also hygiene items) were delivered to the most vulnerable households whenever security conditions did not allow cash modalities.
- → **1,497 households** in the towns of Djibo and Gorom-Gorom (province of Oudalan) improved their resilience by **developing urban micro-gardens** through raised bed gardening, thus growing vegetables and condiments at home and supplementing their diets, applying also water conservation techniques.
- → **Training courses on soil management**[1] **were conducted and then applied on 250 hectares** in the province of Passore. Furthermore, **400 hectares of agricultural land were recovered using "assisted natural regeneration"** (ANR) including also water restoration, and **799 needy** participated in the work through a "Cash-for-Work" modality[2].
- → **Training sessions on how to treat malnourished children** were organised **for local medical-health workers and public** stressing the importance of the use of safe water.
- → In the provinces of Soum, Oudalan, Seno and Passore, **enriched flour** was distributed monthly to **children 6-23 months** from households exposed to food insecurity to prevent acute malnutrition; fortified flour was distributed **to mothers and pregnant women as well,** teaching them also about the importance of safe water in the preparation of food.
- → **Awareness-raising seminars on nutrition concerns, zero hunger and general health** were organised, allowing not only participation but also empowerment, the maintenance of livelihoods, and the long-term sustainability of the community.
- → A **Community Protection Approach was adopted in the humanitarian operation,** involving the establishment of a Feedback, Complaints, and Response Mechanism (FCRM) to meet the specific requirements of women, children, and men in emergencies.

1 For example, *half-moon* and *zaï* rainwater harvesting techniques for soil and water conservation. These methods involve digging large crescent-shaped ditches or small holes that help control rainwater, channel it toward crops and improve infiltration.

2 The Cash-for-Work modality provides employment to unskilled and semi-skilled workers on labour projects such as rehabilitation of irrigation systems, soil conservation, and road construction and maintenance.

ADDRESSING THE NEEDS OF THE SAHEL REGION

WeWorld works in the Sahel region also in Niger and Mali to support the population through interventions that ensure food security of adults, children and newborns, access to basic services and essential goods, child protection and access to education, as well as the creation of social safety nets and economic support for the poorest families. The multifaceted challenges faced by these countries affect people's lives by limiting access to fundamental services such as healthcare, sanitation, and hygiene, as well as necessary items like water and food.

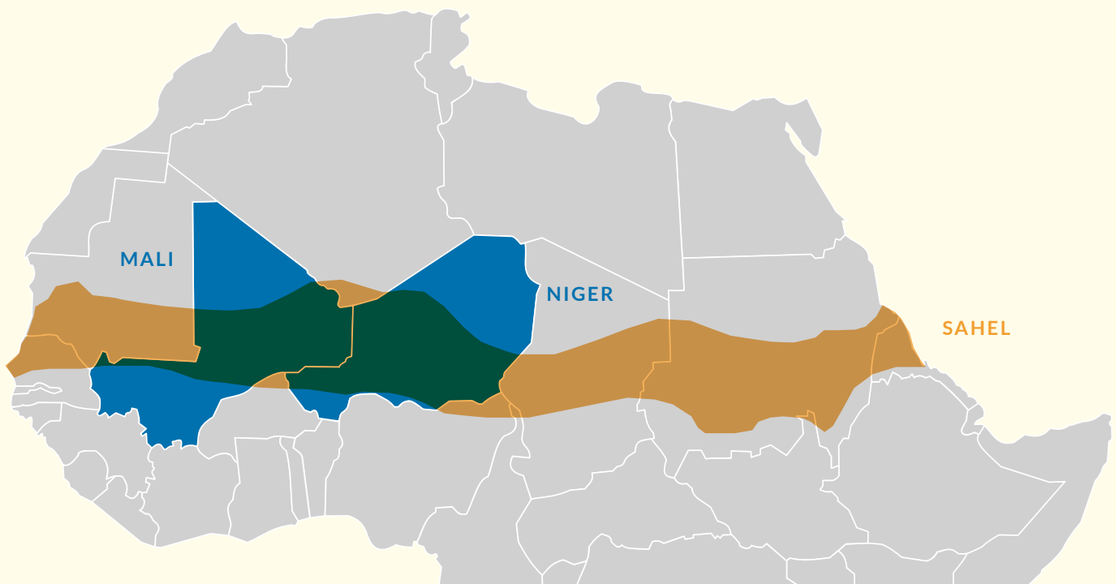
As a result, we identified the following goals in the WASH sector to ensure that fundamental rights are guaranteed and to enhance community empowerment and resilience.

The Sahel is one of the world's hunger hotspots, with over **1 million children** under the age of five facing **severe malnutrition** by 2023.

Niger has the most severe wasting burden in the central Sahel, with **430,000 children expected to die** in the same year.

In **Mali**, severe wasting is expected to increase by 18.4% to **367,000 children** and boys, up from 309,000 last year.

(UNICEF, 2023d)



WASH and INCLUSION

WASH and HEALTH

Improving safe water availability and access and promoting good hygiene practices to reduce the spread of waterborne and infectious diseases, and thus malnutrition.

Chronic malnutrition is caused by a variety of factors, including the lack of appropriate and safe WASH supplies. Because WASH impacts all areas of food security[3], it is critical to act on the WASH component, including:

- → The improvement of **water points in rural areas**, through construction, rehabilitation and adaptations to protect them from contamination risks, to increase availability and reduce water-related morbidity, which may cause acute malnutrition especially for children under 5[4].
- → The **reinforcement of good hygiene practices, such as handwashing with soap**, to minimise the risk of diarrhoeal diseases, especially handwashing practiced at critical times such as before preparing a meal or feeding a child.
- → The **distribution of WASH vouchers to buy kits for sanitation** (items for building household toilet) and **kits for water** (items for building household well or paying technician for rehabilitation) or kit for hygiene (items for general hygiene of the house but also personal hygiene with a focus on MHM items).

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3 For example, whether it be food contamination, the source of sickness, or the loss in household disposable income.

4 In Mali, since 2023, as part of the WeWorld's project *"Accès au travail et à l'inclusion sociale des jeunes Maliens"*, local workers have been expanding the existing drainage network and culverts. The project foresees, in 2024, the construction of household drains to reduce wastewater disposal in the streets.

WASH and GENDER EQUALITY

WASH and HEALTH

Reinforcing the health system's response to multiple crises, together with the implementation of menstrual health interventions to empower girls and women to manage their periods safely.

Armed attacks and crises affect all the mechanisms contributing to health, including infrastructures and people who serve them. **In Niger, the percentage of coverage of essential health services was 37,4% and 41,6% in Mali (the regional average is 46%)** (WHO/EPR, 2023).
In addition, the Sahel region presents **one of the highest maternal mortality rates globally** (856 deaths per 100,000 live births), due to poor access to maternal and reproductive healthcare as well as a high prevalence of early forced marriage (WHO, 2022). In Burkina Faso, 30% of women does not have a private place to wash and change at home, while in Niger about 45% (WHO/UNICEF, 2023).
To cope with this situation, it is essential to:

- → **Construct and/or rehabilitate healthcare facilities** and establish **protocols for preventing and controlling infections,** while organising also awareness-raising campaigns in healthcare facilities for personnel and patients on IPC (Infection Prevention and Control) and epidemic control and prevention.
- → Support medical staff with the distribution of **healthcare kits** (items for personal protection, hygienic material, water purification and disinfection).
- → Provide health services with adequate sanitation and hygiene facilities, **including gender separated toilets with menstrual hygiene facilities and toilets accessible for persons with disabilities.**
- → **Distribute dignity kits and menstrual health kits, as well as implement education sessions** on menstrual health, including **menstrual hygiene management**, to empower girls and women to manage their periods **securely and with dignity**, reducing absenteeism from school or work, while also **educating boys and men on the importance of menstrual health, fighting taboos and stereotypes.**
- → **Use a gender sensitive approach to mainstream gender in WASH programming**, coping with gender blindness and ensuring women participation and gender equality application in WASH services delivery.

WASH and CLIMATE

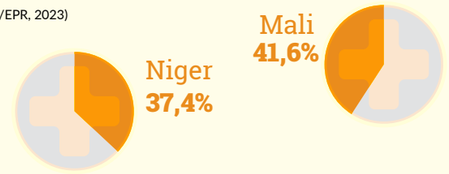
Increasing resilience to the effects of climate change through the adoption of sustainable water management and agricultural practices.

The effects of climate change (droughts, land degradation and unpredictable weather) are exacerbating the plight of millions of people in the Sahel: climate conditions are decreasing agricultural productivity and available pastureland and around 65% of the Sahel's cultivable land is degraded (UN, 2021). To tackle the climate crisis and build inclusive and resilient communities to face rapid-onset hazards in risk-prone areas, while assuring basic WASH services, we can:

- → **Promote water saving through innovative technologies and invest in wastewater treatment and reuse** for agriculture purposes.
- → **Install solar-powered water systems** to ensure families a sustainable quantity of water, while reducing carbon emissions.
- → **Enhance agroecology, rainwater harvesting, agroforestry and small smart irrigation system,** as drip irrigation.
- → **Promote environmental campaigns for the protection of natural resources** such as rivers, springs, lakes and other water basins.

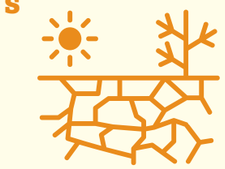
The percentage of coverage of **essential health services** was **37,4%** in Niger and **41,6%** in Mali (the regional average is 46%)

(WHO/EPR, 2023)



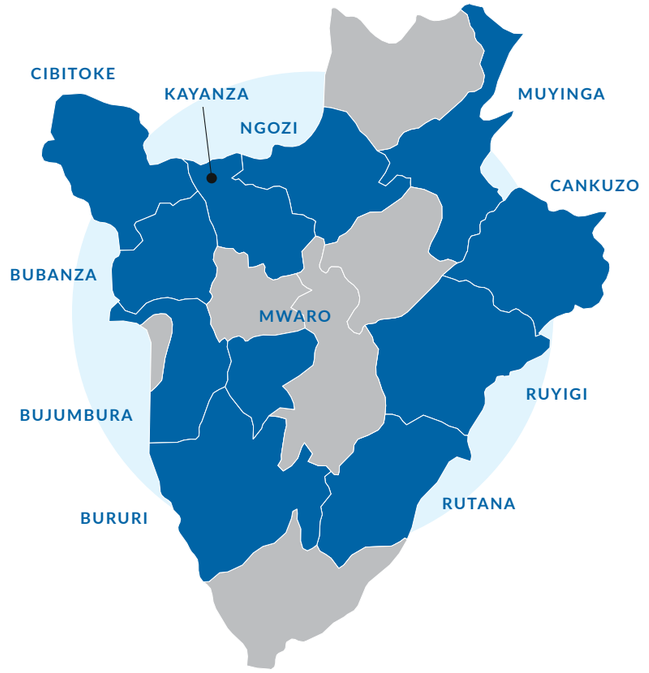
Climate conditions are decreasing agricultural productivity and available pastureland and around **65% of the Sahel's cultivable land is degraded**

(UN, 2021)



WASH in Burundi

OUR ACHIEVEMENTS BETWEEN 2020-2023



8,400 WASH Kits
distributed to people affected by floods and epidemics

34 water kiosks built to **improve water management and quality** at community level

5 awareness-raising activities via radio carried out

1,623,247 people reached

FRAMING THE CONTEXT

WeWorld has operated in Burundi since 1994 and, since 2018, it has been working in the WASH sector with interventions at the community level, in healthcare facilities, in institutional support and emergency response[1]. Burundi is a landlocked country in East Africa, affected by economic and political instability, as well as deep inequalities in terms of access to services and resources.

As of 2023, 54% of Burundi's population has no access to adequate sanitation and only 62% has access to basic drinking water services, a share that decreases to 58% in rural areas, against 91% in urban ones (WHO/UNICEF, 2023). The gap between rural and urban communities is even wider for access to basic hygiene services: in rural areas, 9 out of 10 people (96%) suffer from limited access to such services, lacking either soap or water (against 81% of urban population) (WHO/UNICEF, 2023).

Basic water services are not always guaranteed in public healthcare facilities: on a national scale, 23% of public structures have access to limited water services, and 7% have no water services at all. Furthermore, less than half of healthcare facilities (48%) provide basic sanitation services, which include being usable, dedicated for staff, sex-separated with menstrual hygiene facilities, and adapted for limited mobility. Access to basic water, sanitation, and hygiene services is also not guaranteed in the public school system. 47% of public schools lack water services, with one pre-primary and one primary school out of two (49% and 50%, respectively), and less than 20% of students having access to basic hygiene services (ibid.).

1 In 2023, WeWorld was Lead Consortium of a major multi-annual WASH Project funded by the European Union.

SECTORS OF INTERVENTION

WASH and CHILDREN'S RIGHTS

WASH and HEALTH

WASH and COMMUNITY-RESILIENCE

WASH and BEHAVIOURAL CHANGE

The health system responds effectively to public health emergencies and prevents children's malnutrition by involving pregnant women in the promotion of healthy eating habits.

Burundi has one of the highest malnutrition rates in the world, which mainly affects children under five years old: **as of 2022, 1 out of 2 is stunting** (UNICEF, 2022c). Promoting their rights to health and food is critical for strengthening the health system's capacity and preventing malnutrition at the community and school levels, as well as for building the resilience of vulnerable groups. To do this:

- → **The quality of health and nutrition centres services was improved** through training and monitoring/evaluation plans, growth monitoring activities and community awareness-raising campaigns.
- → **Public health infrastructures** (public medical clinics, consultation, accommodation, temporary hospitalization, laboratories for analysis, etc.) **were equipped with safe water through improved supply, storage and distribution** facilities, thus ensuring access to patients and caregivers.
- → **Sanitary facilities** requiring **urgent interventions** in health and nutrition centres were restored.
- → **Vulnerable groups have been informed and prepared for potential epidemics** through the distribution of emergency kits, which ensured adequate hygienic conditions to protect their health.
- → Thanks to **FARN**s (*Foyer d'Apprentissage et de Réhabilitation Nutritionnelle*), specific nutritional and rehabilitation centres, pregnant women and new mothers learned how to promote good food practices and ways to produce nutritious food, promoting children's future development in their **first 1,000 days of life** and, at the same time, **taking up an active role in improving the resilience of communities**[2].

2 Specifically, women were trained to manage small and medium enterprises which produce and sell "*foyer amelioré*" (low-consumption and environmentally friendly stoves). Women will not only have the task of producing and selling these stoves but also of spreading awareness within the community on the importance of their use since they are not as dangerous for health as traditional cooking methods.
For more information about WeWorld's intervention in Burundi to promote safe and equitable maternal and child health, see "*WE CARE. Atlas of Maternal, Sexual, Reproductive, Child and Adolescent Health*" available at https://ejbn4fjvt9h.exactdn.com/uploads/2023/09/ATLANTE-ENG-preview-affiancate.pdf.

WASH and BEHAVIOURAL CHANGE

WASH and COMMUNITY-RESILIENCE

Drinking water services governance is improved with the involvement of all stakeholders, thus fostering an efficient and sustainable management of the infrastructure.

Improving access to drinking water, particularly in rural areas, is a significant challenge that requires not only investments but also the establishment of strong governance and the strengthening of institutional partners' control to ensure professional and efficient management of the public water services[3]. To reach this purpose:

- → **140 km of drinking water supply lines were built** and rehabilitated, benefitting around 130,000 people.
- → **In 12 municipalities, an inventory of hydraulic assets has been drawn up, and hydraulic diagrams for already existing works have been developed.** Moreover, a technical service for the professional management of drinking water services has been supported. Private connection strategies were implemented in 12 municipalities, providing **support for 1,800 households to acquire meters**.
- → **48 local authorities were trained** in the management and operation of public drinking water services.
- → A **technical and financial monitoring system** for drinking water supply has been set up in 12 municipalities.

3 Data below refer to the activities in progress between 2022 and 2027 within the Project "*Amazi Ni iterambere-Wtaer is development*".

WASH and BEHAVIOURAL CHANGE

WASH and COMMUNITY-RESILIENCE

WASH and CLIMATE

Communities in emergency build resilience and respond quickly to natural disasters or epidemics, tailoring their response to their specific needs while preserving their dignity.

The modification and degradation of ecosystems are leading to a greater risk of climatic hazards, such as flooding. This situation is further dramatized by poor access to water, hygiene and sanitation services, which expose people to the risk of diarrhoeal diseases,and can lead to the outbreak of epidemics, such as cholera. In these cases, the emergency response must target the most affected populations[4]. To address their main vulnerabilities:

- → Drinking water supply was improved by installing bladders in the sites of displaced populations.
- → **6,500 households were provided with WASH kits** to improve hygiene and guarantee their capacity to collect and store drinking water under the right conditions.
- → Awareness-raising campaigns for the promotion of hygiene practices were carried out, reaching **51,000 people**.

4 Data below refer to the to activities implemented in 2020, within the Project "*Emergency Response in Water, Hygiene and Sanitation*".

THE VOICE OF

Allassane Traore,

WASH Project Coordinator for WeWorld in Burundi

"Public Water Service (PES) in Burundi are deeply affected by the environmental consequences of climate change: some ecosystems are changing due to poor water resource management and practices, and springs are drying up and being destroyed by landslides. Currently, protected areas for springs are limited to their immediate perimeter and are not systematically respected. This has a direct impact on the quality of water used by communities.
Our intervention strengthens the protection of the catchment areas with 40 developments and sets up monitoring mechanisms to ensure compliance with hygiene and environmental standards. It promotes a sustainable agricultural approach in these protected areas and the use of bio-pesticides, which will help improving the quality of water resource.
Our multi-annual project is part of a coherent programme for the conservation and enhancement of natural ecosystems: the environmental, economic and social aspects are an integral part of this approach, as they complement each other to protect forests and enhance their environmental potential, promote both agriculture through environmentally-friendly practices and the development of income-generating activities, and improve the social conditions of the population through better access to basic services such as drinking water and the protection of resources."

WASH in Kenya

OUR ACHIEVEMENTS BETWEEN 2020-2023

1 Community spring protected and fetching points rehabilitated (at Kinna, Isiolo County) to improve the availability of **safe water** for domestic use

12,178 people reached

20 blocks (2 latrines per block) provided to **10 schools**

2,370 children reached

11 trainings to eliminate **open defecation** practice in 11 villages

31,314 people reached

8 Ventilated Improved Pit Latrines built in **1 primary school**

493 children reached

1 awareness-raising activity carried out on for **World Toilet Day**

158,716 people involved

1 Borehole built (in Merti town in Isiolo county)

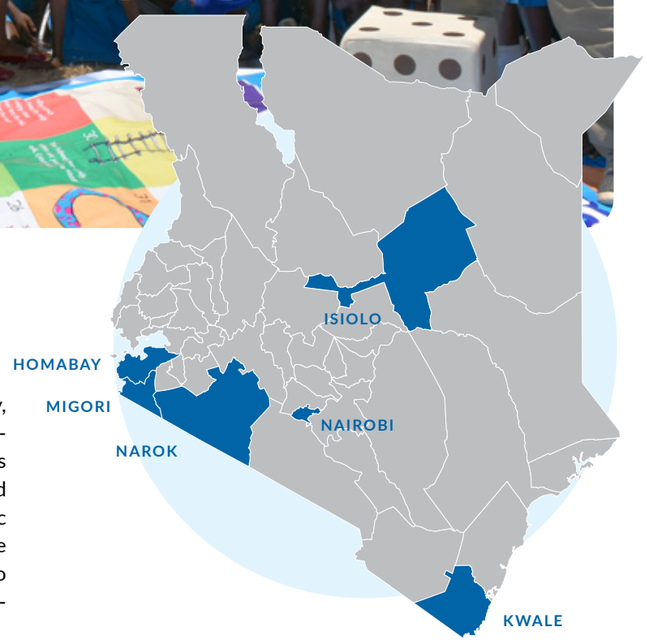
3,250 households reached for a total of around **12,585 people**

5 water tanks provided to **5 schools** for rainwater harvesting

2,972 children reached

1 spring rehabilitated, **1 borehole** drilled and **4 water plants** assessed

134 water facilities management committee members involved



FRAMING THE CONTEXT

WeWorld has operated in Kenya since 2009. In the country, droughts and irregular rainfalls caused by climate change result in reduced harvests, significant loss of economic earnings for many communities with a nomadic pastoral lifestyle[1], and a sharp increase in malnutrition, which has become a public health problem. In addition, groups living in rural areas are characterised by a low level of hygiene and poor access to clean water, which is one of the main causes of the high diseases burden.

As of 2023, only 63% of households has access to at least basic drinking water services, and this share decreases to 53% in rural areas, against 86% in urban ones (WHO/UNICEF, 2023). Moreover, only 37% of households benefits from access to basic sanitation services, and 29% suffers from limited access to hygiene services, lacking either soap or water (ibid.).

Access to basic water, sanitation, and hygiene services is also lacking in the national school system, particularly in rural areas, where 1 school out of 4 has no water service and only half of them have basic sanitation service (namely improved, usable and sex-separated) and most of them (85%) has no hygiene service (ibid.) In public national healthcare facilities, 1 out of 4 (25%) has access to limited water services (34% if in rural areas), and 7% has no water service at all (ibid.).

1 Water scarcity caused by climate change also causes an increase in conflicts over such resource among communities. Indeed, people might destroy others' farms, water pipes or even kill others to ensure themselves the minimum amount of water needed to survive.

SECTORS OF INTERVENTION

Rural-pastoral communities benefit from both structural interventions and trainings to enact behavioural changes resulting in the diversification of productive resources to cope with repeating droughts and a consistent water supply for agricultural production, animal and human consumption. Food security and sanitation are improved, and chronic malnutrition in children under five decreases.

Most villages rely on contaminated, often saline, water sources that are more than five kilometres away. Only a minority of households uses water purification methods. As a result, diarrhoea, along with respiratory infections, malaria, pneumonia, and urinary infections, is one of the most common diseases. In addition, about half of children aged 6 to 59 months gets sick from diseases caused by a lack of water and hygiene. **Beside this lack of infrastructures, good practices and trainings on both WASH in schools and WASH in agriculture need to be implemented,** to remedy the inadequate knowledge and education on the matter which affects communities and children's wellbeing. Therefore:

- → **16 primary schools in Isiolo county have been provided with roof gutters and water tanks** for rainwater harvesting.
- → **23 targeted public primary schools have been supported with kitchen gardens** to promote better nutrition for both students and household members.
- → **6,000 students from the 23 targeted schools benefitted from improved hygienic and nutritional conditions** thanks to growth monitoring, the administration of Vitamin A and vermifuge treatments from **6 equipped healthcare facilities**.
- → **199 board members of the 23 target schools have been trained on sustainable agriculture** in arid contexts and contribute to the creation of domestic gardens and school gardens and to improvements in the consumption of nutritious food by children.
- → **Local artisans designed murals** with key messages to promote sanitation and hygiene.
- → **46 teachers have been trained** on nutrition, growth monitoring and good hygiene practices and disseminate them.
- → **11 villages practiced Community Led Total Sanitation methodology (CLTS) to eradicate open defecation practices**, which included activities such as village

triggering, CLTS follow ups, ODF (Open Defecation Free) villages certification, quality control assessment by the National government, celebration of ODF villages, training of Community Health Promoters to support the implementation at the community level and quarterly awareness-raising forums on proper hygiene and sanitation practices.

- → **20 health extension workers have trained rural community members** through human waste disposal education sessions.
- → **4 water storage facilities (water pans) were rehabilitated or constructed** to improve the availability and utilisation of water for crop production and homestead, and to strengthen Water Resource Users Association (water management committees) through progressive capacity building.

THE VOICE OF

Mohamed Amin,
14 years old, Isiolo County, Student Representative

"The water we use at school comes from a well in the municipality of Isiolo. We transport the collected water in Jerrycans. I live in Isiolo, where collecting water is a chore for women and children. The government provides water twice a week, but it is insufficient, and we must fight over it. Our taps are usually dry, so our parents must buy water from the supermarket or street vendors, which is very expensive. We have two water tanks at school that do not hold enough water during a drought. My school will be in trouble if the water crisis continues. I'm hoping for an increase in rainfall so we can have plenty of water and plant even more trees. However, the rain is becoming increasingly scarce each year."

Students most at risk of dropping out stay at school and are engaged in quality and inclusive education.

Especially in rural areas, **children's likelihood to drop out of primary school is affected by several barriers**, such as shortage of quality teachers, inadequate, insufficient or not gender-sensitive facilities, lack of safe water for drinking and handwashing, inadequate teaching and learning materials and unsafe learning environments (Kenya Ministry of Education, 2019). Therefore, several sectors **are to be considered and different groups should be targeted through an inclusive approach to get a multiplier effect (both at school and community level):**

- → **In 39 public primary schools,** learners (especially girls) had access to an improved quality basic education in a healthier and more protected environment that was enhanced through the construction of **10 schools and 42 new gender-separated blocks of VIPs** (Ventilated Improved Pit latrines) spread across 22 public primary schools[2].
- → **12 schools in Kwale county have been involved in WASH and climate change campaigns** and tree planting in schools.
- → In the construction of the latrines a **participative approach** was adopted: on one hand, county public health officials plan, design and develop the Bill of Quantities (BOQs)[3] and the infrastructure designs, on the other, at the school level, the board of management members were involved in the identification of the site and in the selection of local workers who took part in the construction of the latrines.
- → **Awareness-raising activities are carried out for Menstruation Day and Global Handwashing Day** to highlight the importance of good menstrual hygiene management and to distribute sanitary pads to girls in grade 6. Experts on the matter delivered presentations on menstrual cycle, menstrual hygiene management and proper menstrual hygiene waste material disposal. All the activities involved boys and girls so that the so that girls could feel confident and secure whilst being on their periods, and boys understood what it means for a woman to have their period[4].

THE VOICE OF

Calvince Mikingo,
Programme Manager for Health, Nutrition and WASH for WeWorld in Kenya

"One of the main goals of our interventions in Kenya is to eliminate health inequalities, which have resulted in a high incidence of disease among communities: our actions have led to increased latrine coverage through Community Led Total Sanitation methodology in the communities, and to the construction of accessible and gender-sensitive toilets in schools, where we sustain water supply through rainwater harvesting. Besides structural interventions, we focus on behavioural change, by disseminating hygiene-related knowledge, attitudes and practices amongst different populations. Finally, we ensure sustainable access to quality water through the drilling of boreholes, solarisation and piping to schools, hospitals and different communities, and we construct water kiosks to address the high demand for water in ASAL (Arid and Semi-Arid Lands) regions.

In these regions, we also work to counteract the effects of climate change, through mitigation and adaptation strategies. Specifically, we focus on tree planting sessions in schools around water drainage points, such as soak pits. As a mitigation measure to GHG emissions in the atmosphere, we provide schools and communities with smart agriculture facets, such as shed nets. Additionally, we support the supply of drought-resistant seedlings to primary schools, to enhance climate resilience through diversification and adaptation. Moreover, as a climate adaptation strategy and poverty reduction initiative, a drip irrigation system is currently ongoing amongst different women groups."

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2 The VIP (Ventilated Improved Pit Latrine) is an improvement over the single pit because continuous airflow through the ventilation pipe vents odours. Also, it does not require a constant source of water, it has a longer life than a single VIP (indefinite, if maintained properly), it significantly reduces pathogens and it has potential for use of stored faecal material as soil conditioner.

3 A Bill of Quantities is a precise breakdown of all the material, labour and parts required for a successful construction project. This document provides information on cost estimating, project overruns, material ordering, etc.

4 Moreover, WeWorld also supports the Global Handwashing Day, World Toilet Day to raise awareness on the importance of handwashing and to discourage communities from open defecation whilst encouraging latrines construction from the locally available materials.

WASH in Libya

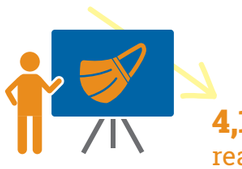
OUR ACHIEVEMENTS BETWEEN 2020-2023

141 toilets rehabilitated in **7 schools**, affecting **7,730** pupils and **847** school staff

4,837 hygiene kits distributed to **families and migrants**

100 water and sewage infrastructure set up in **8 municipalities** enhanced

24 awareness sessions on hygiene practices, COVID-19 and Infection Prevention and Control (IPC) held



4,114 people reached

7 capacity building sessions on **COVID-19** implemented, involving **420 school staff**

14 healthcare facilities supported through the **rehabilitation of WASH infrastructure**

FRAMING THE CONTEXT

Since 2018, WeWorld has been working in Libya on projects aimed at strengthening civil society and human rights, as well as supporting the most vulnerable groups. The ongoing armed conflict, combined with political and economic insecurity, has resulted in significant infrastructure damage and considerably decreased access to basic services and income for the population. Furthermore, because of frequent power outages and interruptions in water supply, the country has experienced critical water stress, ranking among the top eleven[1] most water-stressed countries in the world (UNICEF, 2022d).

Water supply issues have a strong impact on Libyan and non-Libyan populations' living conditions[2] and health, as well as sanitation facilities and the healthcare system: according to UNICEF (2022e), nearly 381,000 people require access to drinking water and sanitation by 2022. Only 24% of the population could use safely managed sanitation facilities in 2022, with 2% being emptied and treated and 10% being treated (WHO/UNICEF, 2023), indicating that water-borne diseases are one of the leading causes of morbidity in Libya.

1 According to World Resources Institute, 25 countries face extremely high water stress: Bahrain, Cyprus, Kuwait, Lebanon, Oman, Qatar, United Arab Emirates, Saudi Arabia, Israel, Egypt, Libya, Yemen, Botswana, Iran, Jordan, Chile, San Marino, Belgium, Greece, Tunisia, Namibia, South Africa, Iraq, India, Syria (WRI, 2023).

2 In Libya, conflicts and crises outside and inside its borders have produced subsequent waves of refugees and internally displaced peoples (IDPs). According to UNHCR, the country hosts 49,713 registered refugees and asylum-seekers and 125,802 Libyans currently internally displaced (2023).

SECTORS OF INTERVENTION

The healthcare system provides a quality response to health emergencies and promotes inclusive access to sanitation facilities.

In Libya, **an estimated 300,000 people need humanitarian assistance, especially asylum-seekers, refugees, migrants, and displaced Libyans who live in unsafe conditions, with little or no access to healthcare, essential medicines, food and safe drinking water** (UNICEF, 2023e). Hygiene and health conditions have been worsened by the COVID-19 pandemic and its associated preventive measures, which further affected the already struggling public healthcare system. To ensure the adoption of WASH preventive measures (such as handwashing, good hygiene, protection tools against infection, etc.) for public health emergencies, together with reinforcing the reaction and stability of the healthcare system:

- → The capacity of the healthcare system has been strengthened through **direct support to sanitation facilities in the form of equipment,** such as the distribution of medical supplies (triage kits and hygiene kits to protect medical personnel and the population) and cleaning materials, **as well as refurbishment** (such as tilling, plumbing, electrical work, water treatment, and carpentry).
- → **Healthcare professionals and local medical workers have increased their capacity to manage, operate, and maintain the enhanced facilities** efficiently and inclusively.

WASH and HEALTH | **WASH and BEHAVIOURAL CHANGE** | **WASH and INCLUSION** | **WASH and COMMUNITY-RESILIENCE**

- → Local community recovery was enhanced by **equitable access to vital health services and key protections for migratory populations on the move and returnees**.
- → To prevent the spread of diseases, **educational sessions on risk reduction** related to COVID-19 (as infection prevention control), on the corrective usage of Personnel Protective Equipment (PPE), and proper hygiene behaviours have been implemented, also through innovative methods, such as graffiti paintings, together with the **installation of 12 handwashing stations**[3], each connected to the public water network and equipped with a solar power system.
- → The healthcare facilities' waste disposal has been improved thanks to the **provision of covered containers for proper storage and to throw away infectious waste**, as well as PPE kits for solid waste handlers.

3 These stations have been installed within the project *Effective community response to the COVID-19 pandemic*, implemented by WeWorld in Sebha Mantika from 2020 to 2021. For more information see: https://www.weworld.it/en/what-we-do/global-projects/effective-community-response-to-the-covid-19-pandemic.

Communities reinforce their capacity building to respond to water scarcity, as well as their resilience to mitigating and adapting to climate change effects.

Climate change in Libya is characterised by increased droughts and water scarcity, which has a substantial impact on the availability and quality of water for domestic, public, and industrial usage. Furthermore, climate change-related cyclones and flooding harm sewage infrastructure and sanitation facilities. Concerns have been expressed regarding the potential spread of waterborne diseases because of the contamination of drinking water sources. For example, because of Storm Daniel's floods, approximately 300,000 children are now at risk of diarrhoea and cholera, as well as dehydration and malnutrition (UNICEF, 2023f).

→ **Communal water tanks have been installed alongside purification units** as a key component for community well-being, particularly in affected areas where existing water networks are compromised or insufficient to meet community demands, to prevent waterborne diseases and ensure reliable access to safe drinking water.

→ **Solar-powered water pumps have been provided** to improve the reliability of water supply, particularly during the hotter months, and to reduce the impact of climate change on water resources, while **awareness campaigns** to reduce water and electricity consumption (using **innovative mediums such as graffiti and billboards on street lighting poles**) have been organised.

→ Municipalities addressed the needs of the population in the long term **through capacity-building training for public officials, staff and civil society actors**[4], including sessions on mechanics and solar energy to strengthen technical and managerial skills.

→ **More than 1,800 children participated in community-based recreational activities** such as drama, crafts, music, dance, storytelling, sports, art, and creative expression sessions**, with the goal of promoting the development of life skills, strengthening community cohesion and resilience, enhancing children's overall wellbeing, and empowering local communities facing the effects of climate change**[5]**.**

→ To reinforce sustainable waste recycling, **plastic waste containers and handcarts and garbage trucks have been provided, spare parts and maintenance tools have been distributed, together with the installation of comprehensive solar energy systems, for improved sanitation and waste management.**

→ Communities strengthened their awareness of climate change by holding training sessions on acts that may exacerbate its consequences, such as waste incineration, and encouraging the adoption of good practices, such as waste disaggregation and sustainable water management[6].

→ In coordination with the ministry of local governance, **National plans for waste management** have been prepared.

4 Capacity-building training activities involved 8 municipalities in Western, Eastern and Southern Libya, within the project *Water, Hygiene and Environment Management (GAIA)*, implemented by WeWorld-GVC, INTERSOS and MIGRACE. More information at: https://www.weworld.it/en/news-and-stories/news/water-hygiene-and-environment-management-the-new-gaia-project-in-libya.

5 Data refers to the activities implemented between September and December 2023 within the WeWorld *Emergency Response to Flooding* in Libya. More information about the project is available at https://www.weworld.it/sostienici/campagne/emergenza-alluvione-in-libia.

6 This was also achieved thanks to the figures of Community Mobilizers: in collaboration with Migrace Organization, a Libyan-basaed humanitarian organization, a wide team of community mobilizers has been deployed, reaching thousands of community members each year.

The supply of accessible, safe and equitable WASH services reduces inequalities that affect mainly the most vulnerable groups, such as women, children and people with disabilities.

Access to water and sanitation facilities in Libya is highly discriminatory, with disparities being particularly evident in the Sahel and interior cities. The impoverished and marginalised geographical areas are the most affected, while rural populations, low-income communities, migrants, internally displaced persons, women and children face the greatest barriers to access. For example, 49% of schools lack handwashing facilities with water and soap, and the low number of gender-segregated restrooms (21%) leads to harassment difficulties (ACF/UNICEF, 2022). To reduce these inequalities:

→ Rural communities and marginalised areas faced lack of proper sanitation infrastructure thanks to the **rehabilitation of safe sanitary spaces, including toilets with gender disaggregation**, provided with covered bins in women's toilets for menstrual hygiene management.

→ A **safe space for women and children** in Southern Libya, which included **improvements in water and hygienic supplies**, has been provided. This space, adorned with a large graffiti mural inspired by women's empowerment, has represented a **hub for engagement and capacity building** among women in the region, covering vital topics like scorpion sting treatment[7].

→ **12 large handwashing stations in densely populated areas, each with a child-friendly design, including a 5000-liter water tank and taps at varying heights for accessibility by children and persons with disabilities (PWD)** have been installed in Southern Libya. These taps are provided with Information, Education, and Communication (IEC) materials, designed with images for easy understanding by children.

→ **To uphold people's dignity, hygiene kits, including items such as soap, menstrual hygiene pads, toothbrushes, toothpaste, and other sanitary supplies, have been distributed**. The provision of devices to enhance mobility, hearing, or vision for children with special needs, when required, has been foreseen.

→ **7 primary and secondary schools' WASH facilities have been rehabilitated, affecting 7,730 pupils and 847 school staff.** Cleaning materials, thermometers, "stand here" signs, posters and educational board games were distributed, and key hygiene messages were painted on schools' walls[8].

→ To foster good hygiene practices from child-to-parent, **awareness-raising campaigns on handwashing and Infection Prevention and Control (IPC) protocols for students and school staff have been implemented.**

→ For five years, Libyan children **have participated in the "Global Handwashing Day"**, which, in addition to activities promoting good hygiene practices, included **the distribution of child-specific hygienic materials** like toothpaste and toothbrushes.

→ **Social cohesion has been reinforced through awareness campaigns** promoting equitable access to public sanitation and the inclusion of the most vulnerable groups, such as women, children, people with disabilities (PWDs) and migrants.

7 Scorpion sting syndrome is caused by the presence of deadly scorpion species, especially in the southern part of the country. This syndrome is a life threatening emergency in children and older individuals, especially, who are suffering from respiratory and/or cardiovascular diseases.

8 This latest data concerns the project *Effective community response to the COVID-19 pandemic*, implemented by WeWorld in Sebha Mantika from 2020 to 2021. For more information see: https://www.weworld.it/en/what-we-do/global-projects/effective-community-response-to-the-covid-19-pandemic.

THE VOICE OF

Margherita Winter,
Programme Coordinator for WeWorld in Libya

"In Libya, the implementation of WASH in schools is a critical aspect of ensuring children's rights and promoting education. WeWorld plays a significant role in promoting WASH in schools and ensuring children's active participation. For example, we have developed child-friendly awareness materials and engaged students during the COVID-19 pandemic with large graffiti in schools, conveying essential WASH information. Collaborating with local authorities, WeWorld has hosted outreach events centered on children, integrating WASH and hygiene messages. For five years, it has participated in the "Global Handwashing Day", reaching numerous children through awareness campaigns. However, the challenges are still significant and WeWorld's interventions are crucial in addressing deficiencies in WASH services, focusing on data collection and analysis on water quality and safety in schools, and promoting local empowerment and cooperation in WASH initiatives. This comprehensive approach is vital in ensuring the health, safety, and education of children in Libya.

Moreover, WeWorld has introduced several innovations in awareness-raising campaigns: during the COVID-19 pandemic, for example, with curfews making direct outreach challenging, WeWorld adopted graffiti paintings in schools and healthcare facilities for spreading awareness. In addition, in collaboration with our implementing partner Migrace, WeWorld has deployed a wide team of community mobilizers, reaching thousands of community members each year. The diverse methods and themes in awareness campaigns demonstrate a multifaceted approach to promoting WASH and environmental consciousness in Libya. By integrating creative, child-friendly, and community-centered strategies, WeWorld effectively promotes good practices and raises awareness on critical issues beyond the water and hygiene sector, incorporating broader environmental and rights-based themes".

WASH IN EMERGENCY: STORM DANIEL

Flooding caused by Storm Daniel devastated Libya on 10 September 2023. The cyclone has resulted in substantial human casualties, **with about 4,333 people killed and nearly 8,500 people missing as of now** (WHO, 2023e). Furthermore, the extensive damage to water supplies and sewage infrastructure raises concerns about the onset of a public health catastrophe because of the probable spread of waterborne pathogens (DEEP Surge, 2023).
The immediate community-based response focuses on mitigating the difficulty of accessing WASH services and strengthening people resilience in the face of the flood:

- → **Personal Protective Equipment (PPE) and hygiene kits have been distributed to 5,000 people** (at least 30% of children, and 45% of women), while **Libyan Humanitarian Relief Agency (LIBAID) have been provided with communication kits**, including safety clothing, boots, and walkie-talkies.
- → Water purification units have been installed, and communal water tanks and accessible water distribution points have been deployed.

To rebuild essential infrastructure, notably in the areas of water and wastewater, and to improve the living conditions of the affected population, **the immediate response is complemented by long-term planning**[9], including **training sessions on water source management and monitoring, rehabilitation and upgrading of** damaged or contaminated water sources and sanitation facilities, at households and shelter level, and **the activation of a comprehensive solid waste management system** to collect, segregate, and proper waste disposal methods of waste.

9 The first and immediate response was implemented between September and December 2023, while the second between January and June 2024.

WASH IN EMERGENCY: THE EARTHQUAKE IN MOROCCO

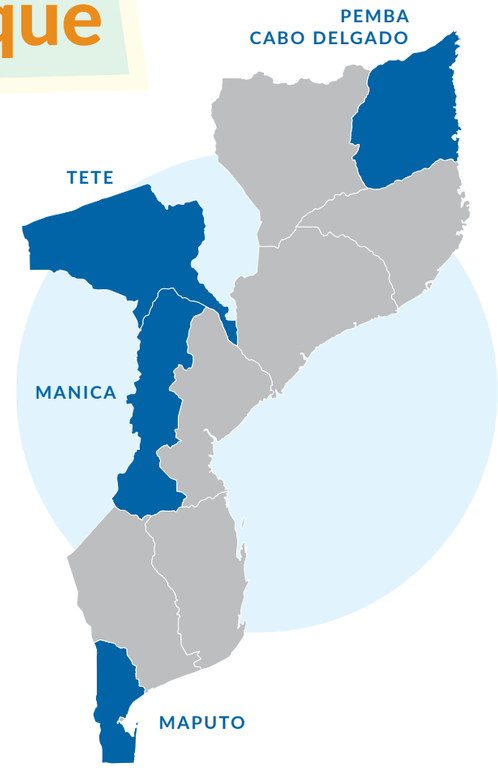
On 8 September, an earthquake hit the High Atlas Mountains of Morocco, causing 2,946 deaths and 6,125 injured (IBC, 2023), and provoking **significant harm to health infrastructures and systems**, with hospitals and clinics unable to function due to structural damage. Moreover, the earthquake **disrupted water networks, intensifying potable water shortages and increasing the risk of waterborne diseases**, especially in rural areas.
Thus, WeWorld supports the NGO CEFA in helping the population to address the earthquake emergency[10]:

- → **Basic non-food items**, including tents, mattresses, sleeping bags, blankets, clothes, **shelters to equipe for schooling, psychological support** for families who have lost their home and children who will be out of school have been given.
- → **Hygiene kits including sanitary items for women, toilet facilities (latrines to avoid the spread of diseases)** have been provided, together with **emergency kits for children**, including 1st and 2nd age milk, biberons, disinfectant and nappies for smallest.
- → **Medicines, especially for chronic diseases** not addressed in the emergency medical response, have been supplied.

10 For more information on the Emergency Response plan in Morocco, see: https://www.weworld.it/news-e-storie/news/cefa-e-weworld-insieme-per-il-marocco.

WASH in Mozambique

OUR ACHIEVEMENTS BETWEEN 2020-2023



6 Casas-mãe-Espera (Maternity Waiting Homes) built

60 rural households trained in the installation and management of **vegetable gardens**

Awareness-raising activities carried out on **COVID-19** prevention measures

more than **20,000 people** reached, and **122 volunteers** trained as activists in their communities

766 people reached in the Acuabe district

8 blocks of latrines, gender-separated and accessible to people with disabilities built **in 4 healthcare facilities** of 4 different communities

Dignity kits and hygiene kits provided to **200 displaced families**

10 blocks of latrines built **in 5 schools**

10,503 students reached

500 Menstrual Health Management kits were distributed in **10 schools**

500 girls involved

FRAMING THE CONTEXT

WeWorld has operated in Mozambique since 2000. One of the country's main vulnerabilities is its susceptibility to the adverse effects of climate change, such as prolonged droughts, which limit resources for farming and, thus, a source of subsistence for most of the population.

As of 2023, only 63% of households has access to at least basic drinking water services and this share drops to 48% in rural areas, compared to 87% in urban areas (WHO/UNICEF, 2023). The gap between rural and urban communities is even broader when it comes to access to basic sanitation services: in rural areas, only 2 households out of 10 (23%) have access to them, and 28% must resort to unsafe sanitation practises such as open defecation (in urban areas, the shares are 61% and 5%, respectively) (ibid.).

Basic water services are not always guaranteed in public healthcare facilities: on a national scale, slightly more than half has access to them (56%), 18% has limited access, and 27% has no access at all. Furthermore, less than half of healthcare facilities (43%) provides basic sanitation services (i.e., usable, dedicated for staff, sex-separated with menstrual hygiene facilities, and adapted for limited mobility), with rural areas accounting for only 2% of the total. Access to basic water, sanitation, and hygiene services is also lacking in the national school system, particularly in rural areas: 1 school out of 2 lacks water service, 1 out of 3 lacks sanitation service, and nearly all schools (94%) lack hygiene services.

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SECTORS OF INTERVENTION

Long-term and community-centred governance practises are adopted. As a result, women's participation in the maintenance, repair, and management of water resources in rural areas is encouraged, and innovative technology to offset the impacts of climate change on agricultural productivity is embraced.

Limited access to irrigation systems forces rural communities to rely on rainwater as the only resource for farming. However, recurring droughts caused by climate change reduce the amount of water available, calling for the implementation of agro-transformation activities and the adoption of sustainable production techniques to increase resilience. Furthermore, water scarcity puts women and girls in danger because they are almost entirely responsible for gathering water for their entire family and can be victims of rape, robbery, and harassment on their way to the water source. Addressing water scarcity from a gender-sensitive perspective is critical, reducing the gender gap that exists within water management committees, where women and their needs are underrepresented. To counteract water scarcity while aiming at a greater gender equality in water governance:

→ **60 rural households were theoretically and practically trained in the installation and management of vegetable gardens, as well as methods of collecting and storing rainwater.** Each family grew its own small garden and, if space was limited, a vertical garden, using the innovative techniques of Food Towers, Container and box gardens, and vertical and hanging gardens. In case of need, rainwater collection systems linked to the house roof pitch are built to ensure garden watering.

→ **Women were empowered and played a leading role in water and well management.** By serving on water committees, women and adolescents gained access to (and control over) resources while also increasing their self-awareness, skills, competencies, and self-esteem, thus benefitting the entire community[1].

1 Within the Project "*Preventing and responding to climate change: resilient mitigating techniques of the drought effect in Swaziland and Mozambique*", available at https://www.weworld.it/en/what-we-do/global-projects/preventing-and-responding-to-climate-change-resilient-mitigating-techniques-of-the-drought-effect-in-swaziland-and-mozambique.

WASH and COMMUNITY-RESILIENCE

WASH and CLIMATE

WASH and INCLUSION

WASH and GENDER EQUALITY

THE VOICE OF

Maria Jessinao, Guro

Head of hygiene

"My role is to check if the well and the surroundings are in good conditions. To make sure that everything is always working as it should, I take turns with 3 other members. It is a new responsibility for me, but it makes me feel useful to my community".

THE VOICE OF

Deliessi Mastala, Guro

Mechanic in charge of the maintenance of the pump

"Thanks to the committee, we constantly confront with each other about possible solutions to problems that may arise. We work in groups, and it is a great method. I am grateful for the training I am receiving, and I am very happy because I think I am an inspiration for other women in the community".

The livelihoods of affected populations are restored by strengthening their resilience in emergency contexts. People in emergency situations are supplied with necessities, food security, access to water and sanitation, and health services to break the cycle of crises.

In 2020, more than half of the population (63.3%) lived in extreme poverty, not having access to public ordinary and emergency health services, an already vulnerable situation further disrupted by the frequent cyclones hitting the country and, more recently, by the cholera epidemic as well as conflicts in the North of the country.
In this scenario, **the resilience of the most vulnerable social groups must be enhanced by improving access to ordinary and emergency health services in safe and decent accommodations**. To achieve this goal:

- → **4 wells were excavated, and water distribution points were built** (accessible to people with disabilities) for **4 healthcare facilities and 4 communities** in the districts of Tambara and Guru.
- → In these districts, the same **4 healthcare facilities also benefitted from the construction/rehabilitation of 4 blocks of double latrines (for a total of 8 blocks), accessible to people with disabilities and gender sensitive**.
- → **6 Casas-mãe-Espera** (Maternity Waiting Homes) **were built** in the healthcare facilities of Dombe, Dárue, Muoha, Rotanda, Rupisse and Matica in the district of Sussundenga, and equipped **with 32 metal beds, 32 plastic mattresses and 32 mosquito nets, with 8 beds for each Casa.** These facilities, built near the community healthcare facilities, provided temporary accommodation for pregnant women, who spent the last weeks of pregnancy daily visited by health personnel, preparing to approach childbirth safely. They also represented a safe place for women who would face obstacle in accessing health services (for instance, those who lived far away and would have to travel for several hours, often on foot).

To cope with the displacement of thousands of people caused by the attacks recorded in the Ancuabe district in June 2022:

- → **200 families (766 people) were provided with emergency kits,** both dignity and hygiene ones: priority has been given to female heads of households, pregnant women, the elderly and people with disability[2].

In March 2023, in response to the second impact of Cyclone Freddy:

- → **5 schools temporarily hosted accommodation centres** and, to ensure that lessons were not interrupted, people were hosted short-term and only overnight.

To increase the responsiveness of the Cholera Treatment Centre (CTC) and contain the cholera spread, fuelled by contaminated water and open defecation practices:

- → **2,243 family members of the patients leaving the Center brought back home a total of 300 hygiene kits** that included easy-to-use water purifier.
- → Local authorities and other stakeholders supported the CTCs and the Rehydration Centers, providing them with **disinfection and cleaning materials.**

As of April 2023,
1,386 cholera cases
and **9 deaths** were
reported in the province
of Manica

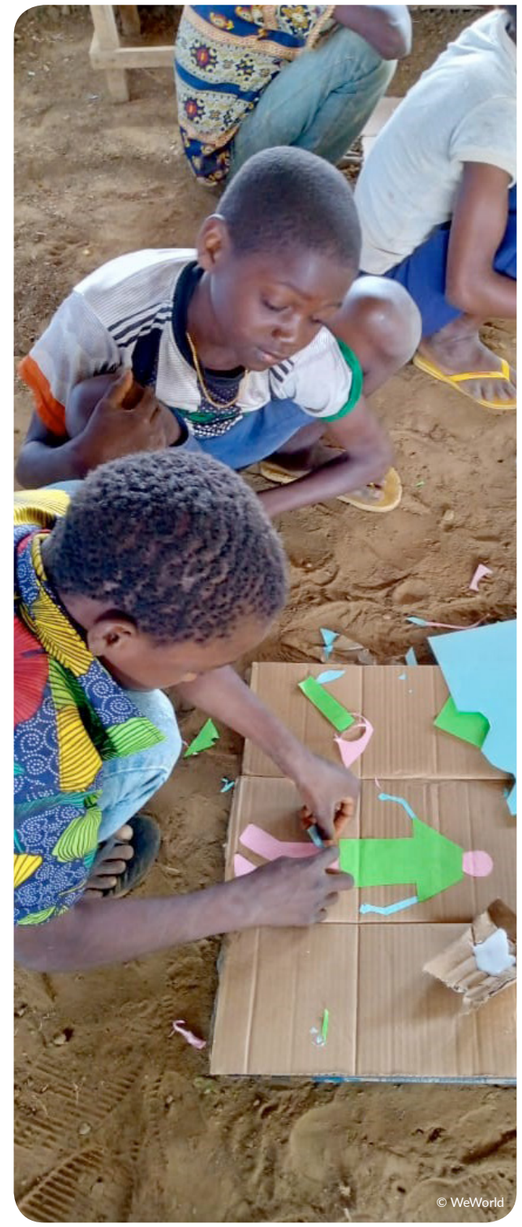
2 The kits included Non-Food Items: two units of cotton capulins, one bar soap, one toothpaste, three toothbrush, two units of panties for children, two blankets, one dunnage, two buckets, two units of panties for adult and one jerrican for water.

Children exercise their right to health and education in emergency contexts.

COVID-19 pandemic and the consequent school closure hindered children's right to education, **compromising their development and future**. In the aftermath of the emergency, a safe reopening of schools must be guaranteed, as well as continuous learning and better-quality basic education in a healthier and more protected environment at school and community level. Therefore:

- → **10 blocks of latrines were built in 5 schools,** each one benefitting of 2 gender-separated blocks, thus reaching 10,503 students.
- → **2 rainwater harvesting systems**, for a total of 10m^3, **were installed in 2 schools**, reaching 488 students.
- → **500 MHM kits were distributed to 500 girls in 10 different schools** in some districts of Pemba, Metuge and Mecufi, providing them with panties, reusable pads, soap and capulanas (local fabric).
- → In **3 neighbourhoods in Pemba**, primary schools committed to guaranteeing education to **8,064 students.** Children participated in several activities and art laboratories and came back to school in safe conditions, thanks to **trainings of teachers on COVID-19 preventions, distribution of hygiene kits and installation of handwashing stations**.
- → In addition, several **awareness-raising activities on COVID-19 prevention measures were carried out, reaching more than 20,000 people in 40 communities and neighbourhoods and training 122 volunteers as** activists in their communities. The activities used the social-art methodology, joining music, dance, visual arts, performing arts and audiovisual, such as **community artistic paths** aimed at raising awareness with production of artistic dissemination materials, and radio programs[3].

3 Thanks to the "*Programa de Apoio á reabertura das escolas em tempo do COVID-19*" Project, funded by the Swiss Development Cooperation.



WASH in Tanzania

OUR ACHIEVEMENTS BETWEEN 2020-2023

35 handwashing facilities built, and **plastic buckets** distributed **in 30 schools**

26,215 teachers and pupils reached

26 water storage facilities and sim tanks built and distributed in **16 schools**

220 hand wash sanitizers distributed **in 10 schools**

18,694 students and teachers reached

20,977 students and teachers reached

FRAMING THE CONTEXT

WeWorld has been present in Tanzania since 2010. Deep inequalities in the country hinder access to resources and basic services for the most vulnerable populations, including rural communities, women, and children.

Clean water from a piped source[1] is insufficient in rural regions. Indeed, as of 2023, just 1 out of every 2 households (49%) has access to basic drinking water services, and even fewer (21%) have access to basic sanitation facilities (WHO/UNICEF, 2023). As a result, individuals are forced to resort to dangerous sanitation practices, such as open defecation, which is practised by 10% of families (compared to 6% of urban households) (ibid.).

Inequalities and water scarcity also jeopardise the quality of health services offered by public facilities, to the extent that it is projected that more than 10% of the 31,000 fatalities caused by inadequate WASH each year are avoidable (World Bank, 2023).

Access to essential water, sanitation, and hygiene facilities is also not guaranteed in the national school system, jeopardising children's retention. Only around 1 in every 2 students has access to basic water and sanitation services, and even fewer have access to basic hygiene services: only 15% attends a school that offers both soap and water (WHO/UNICEF, 2023).

1 A piped water system is a plumbing system that conveys water into a structure from any source including, but not limited to, wells, cisterns, springs, or surface water.

SECTORS OF INTERVENTION

By creating an inclusive environment, all actors involved in children's education promote and protect their rights without discrimination, considering the needs of the most vulnerable children and providing them with long-life skills.

School attendance is hindered, particularly for girls and children with disabilities, by a widespread lack of adequate sanitation and hygiene facilities. This scarcity is not only a significant health problem, but it is also an impediment to obtaining quality education. Promotion of hygiene and sanitation in schools requires structural interventions but also training - using innovative approaches - of every actor involved in education (teachers, parents, government representatives, media, etc.) on topics such as sexual and reproductive health, children's rights, and people with disabilities' rights. To address these issues:

→ On Menstrual Hygiene Day, **10 pre-primary and primary schools organised many awareness-raising activities**, attended by several invitees such as students, teachers, educational institutions and media presenters[2]. Students themselves took part in the activities by preparing and performing a drama play representing the challenges faced during menstruation period, both when at school and at home.

→ **Interactive, participatory, child friendly and disability sensitive methodologies were adopted to promote sanitation and hygiene education.** Methods such as Child to Child (CtC), peer education and life skills-based hygiene education were employed to give students the chance to explore and acquire hygiene-promoting knowledge, attitudes, and values and to take up a protagonist role in the transmission of good practices. Online platforms were used as well, to spread awareness messages about hygiene topics to children parents' cell phones.

→ **10 boxes of sanitary pads were distributed to each school** to remedy their lack in emergency cases and to promote their distribution to girls when they menstruate at school. At the community level, the self-production of washable and reusable pads will be tested as well, to make them more accessible in the future.[3]

→ **4 schools were rehabilitated using a participatory approach**, with improved access to water and gender-sensitive, accessible sanitation. Thanks to adequate pathways built near the schools, children with disabilities were guaranteed full access to educational facilities, and girls were ensured safety and privacy in sanitation facilities. Schools' committees, students, and parents were involved in assessing the schools' priorities, which were coordinated by two District Education Officers from the two municipalities. This ensured end-user ownership and addressed their specific needs: everyone, including children, was involved in evaluating both structural priorities and WASH components[4].

→ **Separated toilets for girls and boys were built**, with changing rooms for girls and urinals for boys, as well as toilets for children with disabilities.

2 The activities include discussions on Menstrual Hygiene Day background, awareness on positive perception of menstruation, MHM and the importance of students' cooperation and support of each other.

3 In Pemba, specifically.

4 For instance, water access, water storage, handwashing points, wastewater management and desludging, drainage system.

Community infrastructure management and maintenance mechanism are strengthened by capacity building training to improve basic service provision (governance, management, operation and maintenance) with a focus on gender, social impact and environmental sustainability.

The adoption of a comprehensive approach to water governance is essential to improve management and distribution practices and to ensure that they truly consider and meet the different needs of multiple stakeholders (public and private actors such as existing community infrastructure management and maintenance committees, medical centres, civil society actors, school committees etc.). To enhance governance structures and deepen knowledge on WASH topics among target groups, several activities are carried out:

→ **40 healthcare workers, as well as those involved in cleaning and sanitation activities in healthcare settings, have been empowered and trained to improve their WASH skills**, knowledge, and attitude. The training encouraged the adoption of best practices in healthcare settings, resulting in significantly lower maternal and newborn infections and a better environment for expectant mothers. Topics covered include environmental sanitation issues to reduce infection risks, ensuring adequate water supply accessibility, and promoting infection prevention and control practices[5]. **WASH Teams (each with 10 members) have been formed and trained on good hygiene and sanitation services,** handwashing, facility and environmental management and hygiene as well as gender equity in WASH Programming. Specifically, **13 Sanitation Clubs** were created in 13 schools in Ludewa district, as well as **4 Health Clubs** in 4 schools in Temeke municipality in Dar es Salaam.

→ **Contaminating, packaging waste will be reduced** and locally made products, with sustainable packaging, will be supported.

5 Within the Project "Kijani Pemba. Strengthening Urban Eco-Resilience in Chake Chake and Mokani" started in 2023 and implemented by WeWorld and Associazione Internazionale Volontari Laici (LVIA).

WASH and COMMUNITY-RESILIENCE

WASH and HEALTH

WASH and GENDER EQUALITY

WASH and BEHAVIOURAL CHANGE

WASH and CLIMATE

THE VOICE OF

Agnes Victor,

Country mission advisor and Monitoring officer for WeWorld in Tanzania

"Many children's attendance to schools is affected by lack of proper and sufficient services, especially water and toilets. Specifically, girls, children with disabilities and children living in rural areas are the most affected by WASH provision. The lack of clean and healthy sanitation, such as toilets and running water, means that girls often do not have anywhere to change or dispose of pads safely and in privacy. Generally, the lack of affordable sanitary products and facilities for girls and women keeps them at a disadvantage in terms of education, when they are young, and prevents their social mobility and productivity, when they become adults.

We provide WASH education to schools (students, teachers and parents) and communities on proper use of toilets and clean water, on the importance of washing hands and menstrual health. On International and National Days on WASH related topics, we carry out awareness-raising activities to make menstruation a normal thing in life, to break silence and avoid those taboos which have been stigmatising girls when menstruating. We observed some progresses in girls' school attendance and academic performance, as well as women's active participation to different political, social and economic sectors and programs. But it is still needed to ensure their participation in the decision-making process and in the management of resources (such as water) as they are the main social segment struggling to get water when there is scarcity or absence."

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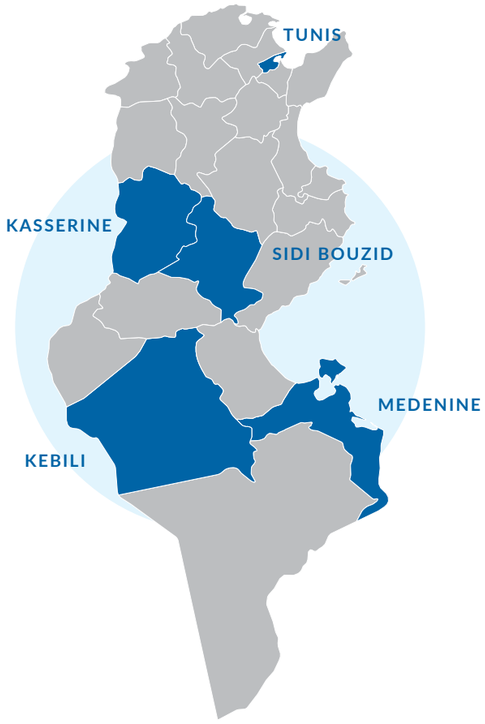
WASH in Tunisia

FRAMING THE CONTEXT

WeWorld has operated in Tunisia since 2012, with interventions aimed at strengthening the social and solidarity economy and governance of the country, where the economic conditions of a large part of the population and the regional inequalities represent a serious risk for the democratic transition.

Tunisia is one of the Mediterranean countries with the least water resources: its water potential is characterized by an imbalanced geographical distribution and a high interannual variability. Moreover, the decline of WASH infrastructure was evident since 2011, and marked by leaks which cause frequent water interruptions and contaminant infiltrations that compromise water potability. As of 2023, even though water supply coverage reaches 97% of households at national level, inequalities persist between urban and rural areas: 2 rural households out of 3 (67%) has access to safely managed drinking water, against 77% of urban ones, and the same gap characterizes access to improved sanitation facilities, since only 66% of rural population benefits from it compared to 89% in urban areas (indeed, around 250,000 people in Tunisia still practice open defecation practices).

Even wider discrepancies are registered for hygiene services: in rural areas 67% has access to basic hygiene services and 33% (1 out of 3) has either no hygiene facility at all or limited access to hygiene services which do not have either water or soap (24% and 9%, respectively); whereas these shares in urban areas are 91% and 8% (WHO/UNICEF, 2023).



THE VOICE OF

Eloise Jaeger,

Project Manager Assistant for WeWorld in Tunisia

"Tunisia is projected to face an increase in extreme climatic events and, by 2030, there is anticipated to be a 5% reduction in surface water and a loss of 50% of current coastal aquifer resources (equivalent to nearly 150 million cubic meters) due to the accelerated rise in sea levels. This decline in water resources would lead to the loss of 16,000 hectares of agricultural land and a reduction in the potential irrigable area by approximately 38,000 hectares, by 2050. Moreover, Tunisia is one of the North African countries where water resources are particularly scarce (450 cubic metres per capita/year), a situation expected to worsen with climate change. In addition to this issue, there is the salinization of coastal aquifers due to rising sea levels.

Considering this, out intervention is aimed at introducing a new dimension to our project in the country, emphasizing sustainable water management and community-based agriculture capable of adapting to climate change. The "Stratégie du Secteur de l'Eau à l'horizon 2050," provides us additional guidance to shape our new direction. Furthermore, our expertise gained from our prior WASH intervention in Libya makes us well-prepared for this new trajectory.

At the same time, it is essential to complement these actions with awareness sessions focused on water conservation. In this sector we gained significant expertise in Libya, where a variety of materials with child-friendly designs were successfully implemented. Leveraging our knowledge of Tunisian agriculture and established connections with key stakeholders in the field, we are well-equipped to propose pertinent awareness materials."

SECTORS OF INTERVENTION

Sustainable water management and community-based agriculture are promoted to adapt to climate change effects and to mitigate the impacts of water reduction on agricultural production.

Tunisia is going through a difficult period of drought and delayed rainfall. After five years of deficit, the reserves in dams and groundwater are at their lowest and the average filling level of the thirty dams is 30%: these events would result in significant adverse impacts on ecosystems, natural resources, health, and economic activities, especially agriculture. Some projections about the impacts of climate change by 2050 and 2100 revealed an increase in aridity in the north of the country, resulting in a decrease in cultivable areas for cereals and olive trees. To mitigate these repercussions:

- → **Aquifers' oversight was enhanced** and collaboration among beneficiaries of each aquifer was encouraged, fostering public awareness of their status in terms of quantity and quality, along with the associated risks.
- → **Preventive measures,** such as territorial management and planning, involving the cooperation of residents who better know the territory, are adopted to protect groundwater quality.
- → **A thorough analysis of WASH service gaps** related to agricultural production has been carried out to identify potential intervention strategies.
- → **New agricultural production techniques and technologies were adopted**, such as the development of smart irrigation techniques, the enhancement of rainfed agriculture performance, the reuse of treated wastewater, and desalination (in line with the National Water Sector Strategy).[1]
- → **Social protection for women, children and youth, especially in rural areas, was enhanced** through women's rights promotion, child protection awareness, and professional training in childcare services.

1 "Stratégie du Secteur de l'Eau à l'horizon 2050", adopted by the government in 2022.

WASH and COMMUNITY-RESILIENCE

WASH and BEHAVIOURAL CHANGE

WASH and CLIMATE

As part of its future strategy, WeWorld will focus its WASH intervention within the Water-Energy-Food-Ecosystem (WEFE) nexus framework.[2] To ensure holistic and impactful interventions:

- → **Water resource management and distribution, particularly in regions facing severe scarcity and water quality issues, will be improved** and initiatives to reduce water contamination will be carried out to ensure potability and address the increasing rates in salinity.
- → **The use of treated wastewater for agricultural irrigation will be promoted**, thus significantly reducing the pressure on freshwater sources.
- → **Dam management for improved water storage and flow regulation will be optimised,** focusing on infrastructure resilience to climate change and safety assessments, coupled with strategies for adaptive water allocation.
- → **Climate change impacts will be integrated into WASH planning**, focusing on sustainable water management and adaptation strategies for agriculture, and promoting practices to mitigate the effects of extreme climatic events on water resources. Moreover, educational programs focused on the importance of water conservation and sustainable usage, especially in agricultural practices, will be adopted.
- → **Comprehensive educational programs in schools and communities will be implemented to enhance hygiene and sanitation awareness** and to encourage active participation of children and students in WASH initiatives for sustainable behavioural change.
- → **Gender-specific challenges in WASH access,** with a focus on women's and girls' needs, particularly in menstrual health and hygiene **will be addressed.**
- → **Partnerships** with national institutes and research centres to leverage scientific expertise in water management and WASH, **will be fostered**.

2 For more info about the WEFE Nexus, see Chapter 2, section WASH and CLIMATE.

WASH in LATIN AMERICA and the CARIBBEAN

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Overview

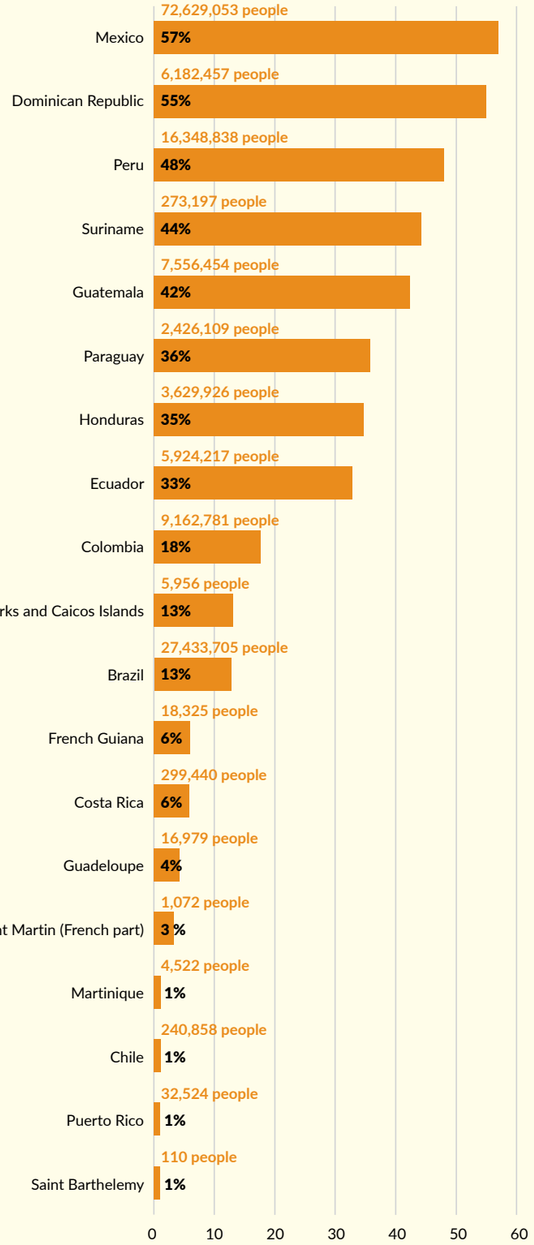
PEOPLE WITH ACCESS TO BASIC WASH SERVICES (%)

Data is updated to 2022. Source: WHO/UNICEF 2023.
Only countries with available information are reported.
The classification of the geographical areas responds to WeWorld elaboration.

COUNTRY	WATER		SANITATION		HYGIENE	
	RURAL	URBAN	RURAL	URBAN	RURAL	URBAN
Antigua and Barbuda	0.00	0.00	98.05	95.40	0.00	0.00
Argentina	0.00	0.00	0.00	98.47	0.00	0.00
Belize	88.69	92.14	83.65	93.57	88.69	92.14
Bolivia (Plurinational State of)	21.89	29.08	47.27	77.40	21.89	29.08
Brazil	0.00	0.00	64.21	94.68	0.00	0.00
Cayman Islands	0.00	0.00	0.00	83.27	0.00	0.00
Chile	0.00	0.00	99.50	99.50	0.00	0.00
Colombia	32.95	78.29	85.52	96.75	32.95	78.29
Costa Rica	83.31	86.54	97.41	98.60	83.31	86.54
Cuba	88.09	94.92	91.06	92.47	88.09	94.92
Dominican Republic	33.35	51.21	79.11	90.53	33.35	51.21
Ecuador	78.50	92.02	90.65	93.16	78.50	92.02
El Salvador	0.00	0.00	77.45	90.96	0.00	0.00
Falkland Islands (Malvinas)	0.00	0.00	99.50	99.50	0.00	0.00
Guatemala	0.00	0.00	57.73	80.31	0.00	0.00
Guyana	85.41	78.23	90.17	93.19	85.41	78.23
Haiti	15.46	27.57	25.45	45.90	15.46	27.57
Honduras	84.33	85.40	79.41	87.78	84.33	85.40
Jamaica	0.00	0.00	90.96	83.23	0.00	0.00
Mexico	93.94	93.94	87.74	93.62	93.94	93.94
Panama	0.00	0.00	66.41	94.57	0.00	0.00
Paraguay	0.00	0.00	92.58	95.75	0.00	0.00
Peru	69.62	0.00	60.26	83.38	69.62	0.00
Saint Lucia	0.00	0.00	84.28	79.44	0.00	0.00
Suriname	66.84	74.80	82.36	93.84	66.84	74.80
Turks and Caicos Islands	88.78	95.37	91.59	93.24	88.78	95.37
Uruguay	0.00	0.00	99.50	98.27	0.00	0.00

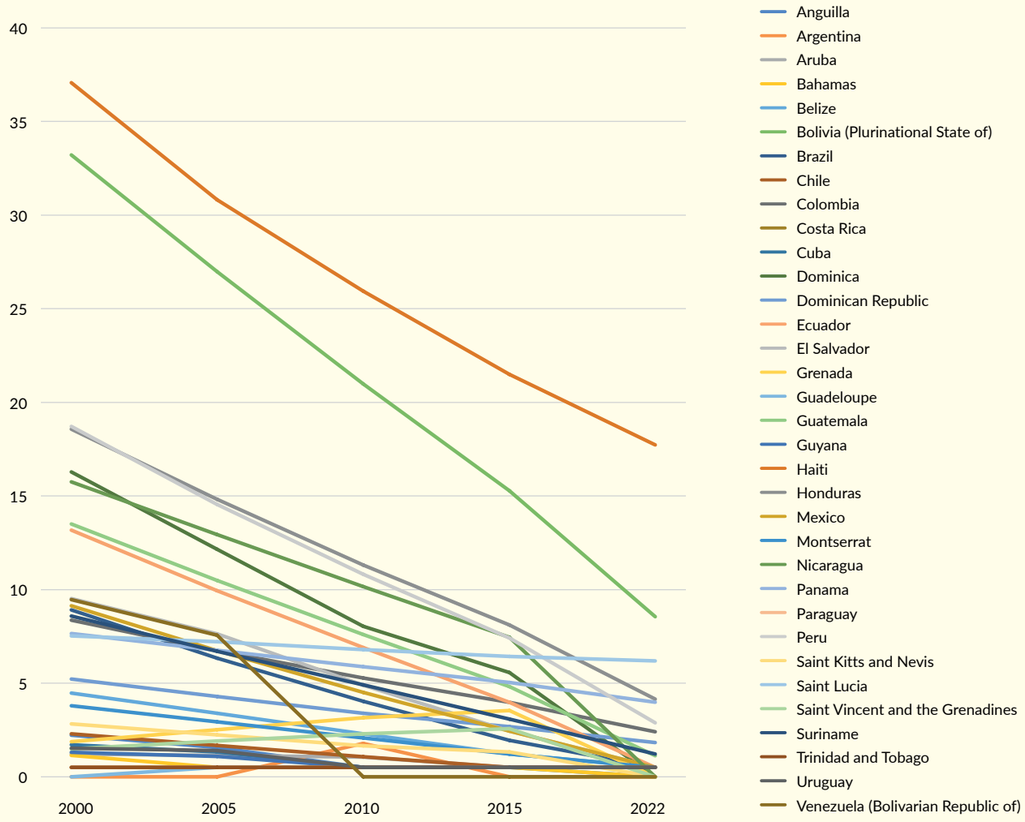
PEOPLE WHO ACCESS WATER THAT IS NOT FREE FROM CONTAMINATION

Data is updated to 2022. Only countries with available data are reported.
Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld.



PEOPLE FORCED TO RESORT TO OPEN DEFECATION IN LATIN AMERICA AND THE CARIBBEAN, 2000-2022 (%)

Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.

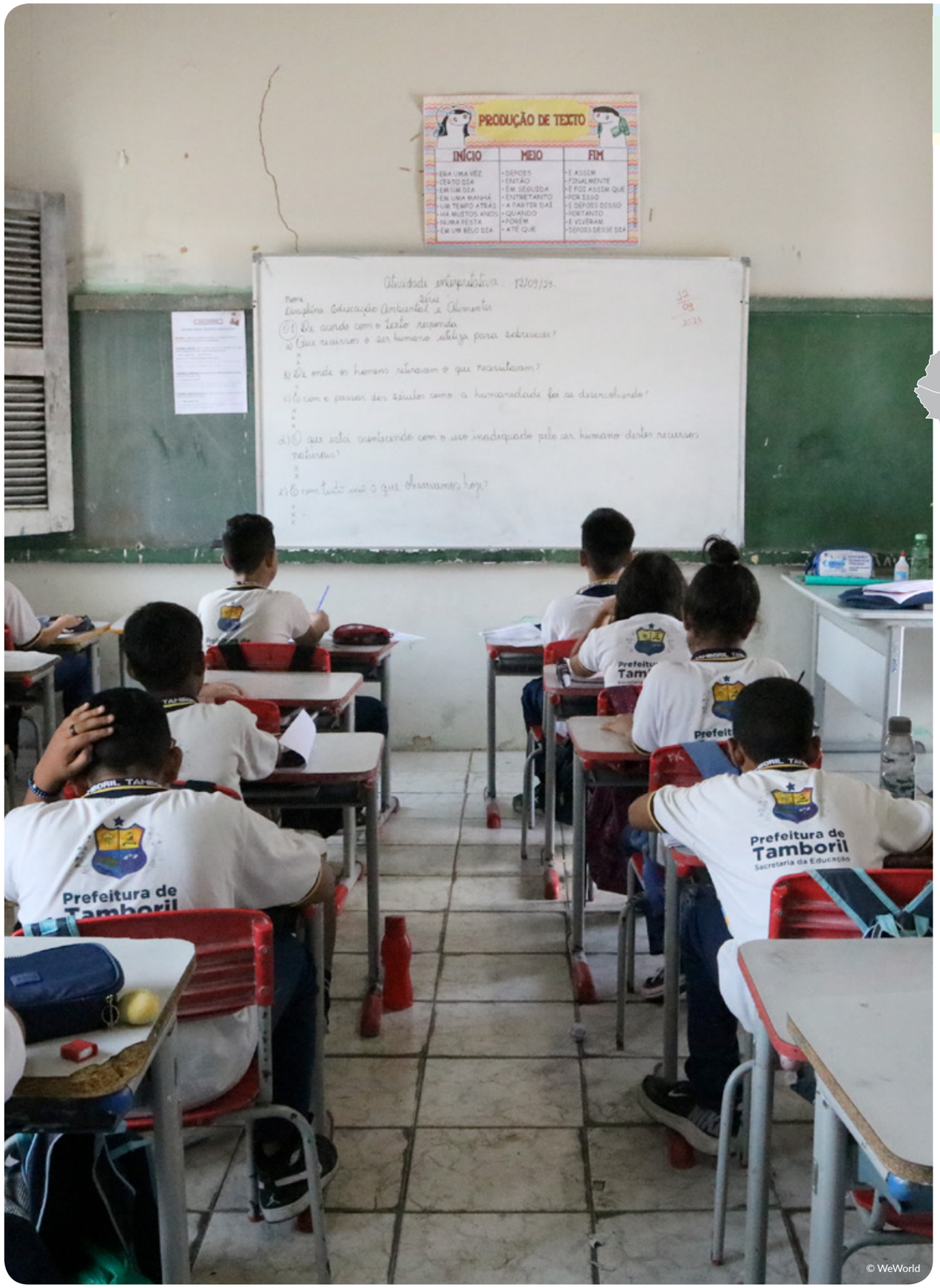


SCHOOLS THAT HAVE BASIC WASH SERVICES (%)

Data is updated to 2021. Only countries with available data are reported.
Source: WHO/UNICEF 2023. The classification of the geographical areas responds to WeWorld elaboration.

COUNTRY	WATER	SANITATION	BASIC HYGIENE
Anguilla	>99	>99	>99
Antigua and Barbuda	>99	>99	>99
Barbados	>99	>99	>99
British Virgin Islands	91	87	91
Cayman Islands	>99	>99	>99
Costa Rica	84	81	81
Cuba	>99	>99	>99
Dominica	>99	>99	>99
Ecuador	79	59	51
El Salvador	82	88	-
Grenada	>99	-	>99
Guatemala	-	76	-

COUNTRY	WATER	SANITATION	BASIC HYGIENE
Honduras	>99	-	-
Jamaica	95	96	97
Mexico	-	74	-
Montserrat	>99	>99	>99
Nicaragua	54	12	40
Panama	34	-	55
Paraguay	72	-	-
Peru	77	80	-
Saint Lucia	>99	>99	97
Saint Vincent and the Grenadines	>99	>99	>99
Turks and Caicos Islands	>99	>99	>99
Uruguay	>99	-	-



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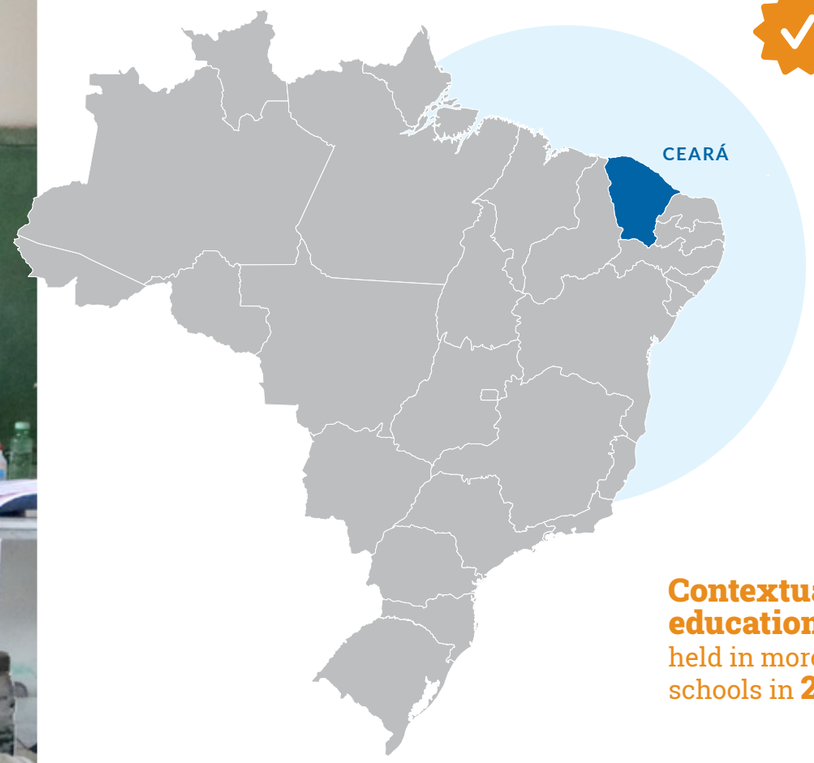
WASH in Brazil



OUR ACHIEVEMENTS BETWEEN 2020-2023

Rainwater storage tanks with a capacity of **52,000 litres** built in **15** schools of **10** different municipalities

3,983 people reached between children and teachers

Contextualised education modules held in more than **150** schools in **27** municipalities

More than 1,500 teachers reached

FRAMING THE CONTEXT

WeWorld has been operating in Brazil since 2008, mainly in the Sertão area, which has been impacted by extended water scarcity and desertification because of climate change and deforestation. Furthermore, existing disparities between urban and rural communities impede the latter's access to safe drinking water, hygiene, and sanitation.
As of 2023, only 1 in every 2 people can benefit from safely managed water service (51% of the population), and the gap is even wider for basic sanitation service. While more than 95% of households can benefit from it in urban areas, only 64% can in rural ones (WHO/UNICEF, 2023).

Access to basic water, sanitation, and hygiene services is also deficient in the national school system, particularly in rural regions, where nearly 1 out of every 2 schools (44%) does not have any water service at all, and 9% does not have any sanitation service at all (compared to 4% nationally in both cases) (ibid.). Furthermore, pre-existing vulnerabilities in schools owing to water scarcity have been worsened by the COVID-19 pandemic, transforming schools into dangerous vectors for viral dissemination due to a lack of sanitisation measures by COVID-19 containment regulations.

SECTORS OF INTERVENTION

Children's right to health and education is secured by enhancing access to clean water and by promoting sanitation in schools and wider communities.

The lack of access to basic WASH services in schools, especially in rural areas, has been further dramatised by the COVID-19 pandemic. Schools reopening did not follow a previous definition of either security protocols or the necessary modalities to be adopted to avoid the spread of the virus. These two factors combined resulted not only in a serious risk posed to children's health, but also in the violation of their right to education in a safe and healthy environment.

WASH service improvement shall be pursued through infrastructural interventions and community training aimed at addressing inequalities and ensuring that all community members have equitable access to clean water, sanitation, and associated knowledge, regardless of their location or socioeconomic status. To reach this goal:

- → **Water distribution systems were installed in 15 schools across 10 different municipalities,** ensuring a safe and sanitary environment for 3,700 students and 283 educators. These systems, which included water storage tanks, faucets, sinks, plumbing, and mechanical filters, were critical in ensuring the availability of potable water as well as promoting health and sanitation standards on school grounds.
- → **15 schools that previously lacked water and sanitation facilities were structurally modified to allow for effective rainwater collection.** On the premise, tanks for rainwater storage with a capacity of 52,000 litres were built using low-cost social technologies and adapted to the semi-arid environment, emphasising the importance of avoiding water waste while also contributing to environmental health. Furthermore, distribution systems were installed to connect the tanks to the foot sinks and foot-operated handwashing sinks (encouraging children to adopt and share these practices at home).
- → Through the "Management of Water Resources" courses, various actors involved in children's education (communities, teachers, etc.) were trained on water and sanitation education and how to maintain new infrastructure.

THE VOICE OF

Massimo Baraglia,

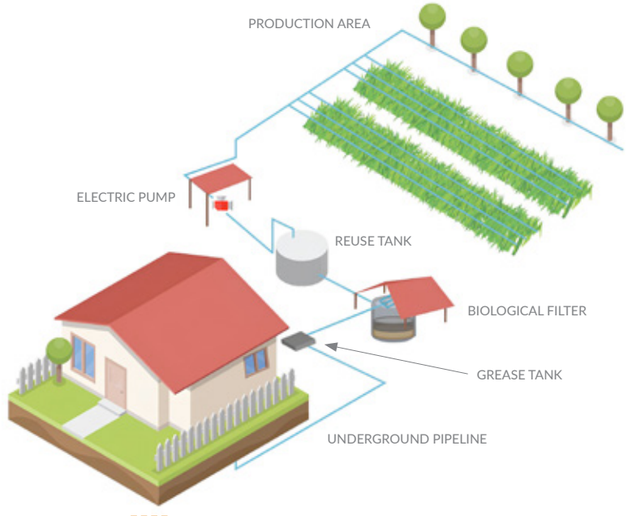
Country Representative for WeWorld in Brazil

"In Semi-arid areas of the country, we implement WASH in schools through a comprehensive and contextualized educational approach, which ensures that the WASH curriculum resonates with the local traditions and practices of the students. By integrating these elements into educational materials, students can better understand and appreciate the importance of water, sanitation, and hygiene in their daily lives. Moreover, to ensure the active participation of students (4-15 years old) in our WASH interventions, we engage them in age-appropriate decision-making activities: for the youngest, these include storytelling, games and simple hands-on activities that teach the basics of hygiene and water conservation; for the oldest, we provide structured project-based learning, where they can apply their understanding in real-life scenarios, fostering a sense of responsibility towards WASH practices.
We use innovative methodologies in our campaigns too, carrying out playful, pedagogical workshops for teachers in public schools, emphasizing didactic approaches to climate change. We also develop Educational Municipal Curriculum Documents, which involve seminars with school communities to incorporate environmental issues into schools' curricula, thus extending the scope of our campaigns to broader topics, such as women's and children's rights. Our approach to sustainability is based on a multi-stakeholder and participatory method, where beneficiaries are involved in project design, implementation, and evaluation. These activities not only educate children and youth about climate change and water resources, but also influence their families, increasing production capacities and diversifying income generation."

Rural communities adopt context-specific and environmentally friendly production techniques for a sustainable use of natural resources, and new generations are educated to boost a cultural and behavioural change.

Desertification, which causes soil nutrient loss and hinders plants from sprouting, is also to blame for the change in river flow rate, making provisions for residents and conventional agriculture scarce. To restrict its spread, it is required not only to regulate these impacts via research, reforestation, and the establishment of protected areas, but also to develop and promote a preventative culture that should be taught and learned from childhood.
The techniques adopted were innovative as they were developed through a deep understanding of the local ecology, by carrying out cutting-edge research which integrated traditional knowledge with modern scientific understanding. To address the root causes of desertification and mitigate current climate change events, while building resilience against future environmental stresses:

- → **Low-cost technologies conducive to cohabitation with semi-arid regions have been innovated and implemented, such as the Bioagua system**, which is specifically engineered to treat greywater[1]. Bioagua is a sustainable technology for filtering water, as the purification process employed physical and biological mechanisms to remove solid waste from the liquid. **The recycled water, channelled in a five-layered filter, was accumulated in an underground tank and then pumped**[2].



1 Water from sinks, dishwashing, and showers, excluding any effluent from toilets.

2 Specifically, the filter has two organic layers (humus and sawdust) and three inorganic ones (sand, gravel, and stone) layers. Earthworms naturally biodegrade impurities, treating up to 500 litres daily.

- → **More than 30 groups of women from rural communities were supported and empowered** by promoting their economic emancipation, which encompassed the creation of vegetable gardens cultivated with environmentally friendly techniques (agroecology), systems for recycling water and reuse of local resources.
- → **More than 1,500 teachers, from more than 150 schools in 27 municipalities, were provided with contextualised education in the semi-arid area**, namely a special type of education that integrates habits, costumes and traditions of local realities (training topics related to the context are identity, cohabitation models with semi-arid areas, seeds, water, agricultural and non-agricultural production process, family dynamics and ecosystem interactions, etc).
- → **Advocacy and lobbying activities** were carried out, both to make contextualized education institutional through *ad hoc* laws ensuring that this educational model would last over time, and awareness-raising campaigns on broader environmental issues, water management and climate resilience.

THE VOICE OF

Vanusa Inácio de Carvalho,

Member of the Association of Crocheters of the Irapuã Community, in the municipality of Nova Russas

"I wanted to improve my family's quality of life and healthy eating free from pesticides is crucial in this regard. Because of this, the productive backyard was a game changer: by planting at home, I am sure of the quality of the food we eat, while also saving on family expenses. I avoid eating something that is not healthy, and I show my children that what we are harvesting in the backyard is healthier.
The biggest challenge to maintain the backyard production is access to water, especially in the dry season. Before the Bioagua system, I had no water in periods of droughts, and it was very difficult, but now with this system I can maintain my plants, not waste water and reuse it".

WASH in Haiti

OUR ACHIEVEMENTS BETWEEN 2020-2023

Voucher and food distributions

3,191 households reached

460 menstrual kits provided

6 primary schools reached

564 latrines built,
767 latrines **rehabilitated** and
1,515 handwashing stations installed

more than 15,000 people reached in **30 communities**

FRAMING THE CONTEXT

WeWorld has operated in Haiti since 2010, intervening after a 7.1 magnitude earthquake struck the country. The country copes with multifaceted crises, facing recurring political setbacks, health emergencies and devastating climate change-related natural disasters.

In 2021, another earthquake (magnitude 7.2) hit the island, causing more than 2,200 deaths, affecting 800,000 people and destroying and/or damaging 138,000 homes (OCHA, 2021). The latest data shows that 7 households out of 10 have no hygiene facility or have limited hygiene services (namely, they do not have either water or soap). Moreover, only 37% has access to basic sanitation services, and 18% resorts to open defecation practices (WHO/UNICEF, 2023).

With thousands of displaced people sleeping in the streets and water and sanitation infrastructure suffering from extensive damage, vulnerable populations are exposed to the risk of infectious diseases, such as cholera. Between October 2022 and February 2023, the epidemic outbreak caused 594 deaths, 33,185 suspected cases and 2,398 confirmed cases (PAHO/WHO, 2023).

In this context, high levels of insecurity and economic instability, as well as complex humanitarian and political crises, pose significant challenges in fostering affected populations' endogenous, sustainable and inclusive development.

SECTORS OF INTERVENTION

Affected communities strengthen their resilience to emergencies by implementing appropriate sanitation practises and promoting food security through the improvement and diversification of agriculture and food production, hence avoiding malnutrition, particularly among children.

While dealing with the aftermath of the 2021 earthquake, several areas continue to see an increase in cholera cases. WASH was a significant issue not only in healthcare facilities, which required expanded water storage capacity or reparation, but also in families. Vulnerable groups have lost their homes and required safe drinking water, hygiene, and sanitation supplies. Meanwhile, open defecation continues to be practiced, making it easier to limit the cholera epidemic. As a result, not only infrastructure initiatives but also behavioural changes in sanitation are critic[1].

- → In contrast to open-air defecation, **more than 15,000 people in 30 areas adopted safer hygiene practices.** Communities determined together how to produce a clean and hygienic environment that might benefit everyone using the Community strategy to Total Sanitation (CLTS) methodology and the CPA strategy. Communities learned the necessity of using latrines to avoid infecting others through solely awareness-raising actions. Behavioural change has been sparked, and **communities have taken the lead in constructing and rehabilitating 564 and 767 latrines, respectively, as well as installing 1,515 handwashing stations. Out of the 30 areas, 28 self-declared End of Open Defecation (FDAL)**, 25 of which have already been recognised as such by the Communal Committee.
- → **5 new drinking water systems were created or restored for the 5 communities targeted**, and more than **5,675 families benefited from new cisterns** equipped with purifying technologies for the rainwater collected (filters or chloral).

The consequences of the earthquake worsened the already alarming food security situation too. In the country, about 4.35 million people (40% of the population) are still experiencing high levels of acute food insecurity, and an estimated 217,000 children suffer from severe and moderate acute malnutrition, a situation exacerbated for those most affected by the natural disaster (IPC, 2023). Therefore, besides satisfying emergency needs, food security must be promoted adopting long-term, sustainable food production techniques, linked to access to safe drinking water and safe environment from faecal contamination thanks to the Community Led Total Sanitation approach[2]:

- → **3,191 food insecure households** were provided with voucher and food distributions.
- → **1,100 farmers experimented complex crop associations** requiring less inputs, by developing agroforestry and diversifying agricultural production (using different seeds and tools and being trained on innovative and efficient agricultural techniques).

Girls in vulnerable situations exercise their rights to sexual and reproductive health and education.

The effects of poor menstrual hygiene management on girls' school attendance, as well as their safety, health, and well-being, are exacerbated in humanitarian crises, where there is a general lack of access to basic menstruation management products and awareness, as well as appropriate sanitation facilities (including water) in schools. Menstrual health and hygiene initiatives can assist in overcoming these barriers. To achieve this goal:

- → **In 6 primary schools, 460 menstrual kits were distributed**, containing reusable handmade sanitary pads for each girl.
- → Awareness-raising sessions in each school have been carried out by professional trainers and with innovative approaches[3].
- → **Young girls learned how to track their period, know their bodies, recognise and accept their emotions and interpret their thoughts**. They were provided with a diary, conceived as a self-discovery tool, which also gave them useful information about period and motivational tips, by showing the story of a young girl menstruating for the first time, to whom they could easily identify. Thus, **girls were given adequate space to openly express** their feelings, thoughts, questions, doubts and fears about the changes that were going on in their lives.

THE VOICE OF

Marie Sonie Brizon

Programmes Director for WeWorld in Haiti

"Haiti has major sanitation and hygiene problems, in both urban and rural areas, caused by several factors: poor waste management, sanitation infrastructure problems, water infrastructure problems in remote areas, and lack of public toilets and latrines in some households. Specifically, the latter leads to open defecation practices, which can contaminate springs, rivers and other water sources, resulting in diarrhoea, vomiting, and cholera, among others. In Gros Morne, in the Artibonite department, we counteracted this practice through the ACAT methodology4, encouraging people to build their own latrines so that they do not have to continue defecating in the open air; while in the Nippes department, we built and rehabilitated several drinking water systems, so that communities no longer have to consume poor-quality water, thus reducing the risk of catching water-borne diseases.

Personal hygiene, environmental and food hygiene, and drinking water consumption are promoted through activities in schools as well, where we also held sessions on cholera and COVID-19.
By adopting a gender-sensitive approach, we held awareness-raising sessions on menstrual hygiene specifically, targeting teenage girls and promoting the acceptance of this change in their bodies, and we provided a kit of washable sanitary towels and a diary to each girl.
The promotion of gender equality characterises the implementation of our WASH programs at community level as well: since the management of household hygiene, food preparation and childcare are mostly women's responsibilities, we always try to guarantee their participation in community meetings and water point management committees."

1 The results listed below refer to the activities implemented with the multi-country Programme "*Accelerated Sanitation and Water for All (ASWA) II*" funded by UNICEF and carried out by WeWorld and Un Enfant Pour La Main, French member of ChildFund Alliance.

2 Data below are extracted from ChildFund Alliance Cholera Outbreak Situation Report #1, available at https://childfundalliance.org/wp-content/uploads/2022/01/Haiti-SitRep1_Cholera_Oct2022.pdf .

3 On topics such as MHM, menstrual cycle, the importance of understanding and accepting period and one's body and how to fight stigma related to menstruation.

4 Community Approach to Total Sanitation which wants to eliminate open defecation practices and encourage the construction and use of sanitation facilities through grassroots mobilization of communities.

WASH in the Andean Region

FRAMING THE CONTEXT

WeWorld has been operating in Peru and Bolivia, two Andean countries, since 2002 and 1987, respectively. The region is highly vulnerable to the negative effects of climate change, including loss of agricultural land, salinisation of soil, displacement of cultivated areas (threatening food security and rural populations' independence), and depletion of water resources due to melting Andean glaciers (some of which have shrunk by more than 90%). This specific result has a significant influence on both human and agricultural water supply: as of 2023, barely half of the Peruvian population (52%) has access to sufficient drinking water and a securely regulated water supply at home (WHO/UNICEF, 2023).

Moreover, extractivism[1] and mining activities infringe on indigenous peoples' rights to consultation, territorial defence, a healthy and adequate environment, and involvement in the management of natural resources such as water. Such operations pollute rivers with mercury, limiting access to drinking water and having serious health consequences, particularly for rural and indigenous communities who lack water treatment equipment. In 2023, for example, more than half of rural families (60%) in Bolivia needed non-piped water (WHO/UNICEF, 2023).

1 A modality of capital accumulation which consists in the removal of large quantities of raw or natural materials, particularly for export with minimal processing.

THE VOICE OF

Ariana Kana Magaño,

Activist, defender and Secretary of the Platform for people suffering from heavy metals in blood

"I became an activist four years ago, in 2019, when my mother was on the point of dying due to a paralysis of her body. She was diagnosed with arsenic, lead, and mercury in her blood, and I almost lost her during the COVID-19 pandemic. That's when I resolved to be courageous and fight for her right to life. In 2009, the mining firm established itself in this region. They promised us that they would offer us possibilities for growth and employment and that our lives would improve. The reality is that it has been 13 years, and our lives have changed for the worse since we no longer have access to water.

Our way of life as a community has come to an end. True development can only be achieved through a sustainable economy, not through an extractive economy. We want our country to invest in a sustainable economy that is based mostly on family farming. A sustainable economy, especially for future generations. We must remember that these minerals are non-renewable resources and fight for their sustainable usage on a global scale. We don't see it now, but those who will come after us in 50 or 100 years would want to have had the opportunity to stop us right now."

"ALIANZA DE ORO": AN ANDEAN EXPERIENCE IN DEFENCE OF HUMAN RIGHTS AGAINST MINING ACTIVITY IN PERU, ECUADOR AND BOLIVIA

Since 2021, a Consurtium between WeWorld, CEDIB (Centro de Documentación e Información Bolivia), COMUNIDEC (Comunidades y Desarrollo en el Ecuador) and CBC (Centro Bartolmé de las Casas) is implementing a project aimed at reducing the adverse effects of companies mining activities on individual and collective human rights of rural communities in Ecuador, Peru and Bolivia.[2]

The activities carried out want to strike a greater balance in the distribution of the benefits of mining activities and, to do so, they **prioritized the promotion of good responsible and sustainable mining practices by companies as an area of intervention**. To achieve such balance, the respect of agreements already made between the communities and the State is paramount, as well as that of the good practices contained in the United Nation Guiding Principles on Business and Human Rights[3] and on the Due Diligence criteria proposed by OECD. Some of the activities implemented are:

- **Protection of the natural resources, such as water,** and promotion of indigenous communities' free access to it as a both human and economic resource (for drinking and domestic use, as well as agriculture and energy use).
- Organization of meeting to train and exchange knowledge and good practices on human rights, defence mechanisms, negotiation processes and human rights due diligence obligations.
- Monitoring processes of the environmental impacts of mining activity, based on both quantitative and qualitative participatory methodology.
- Dissemination of studies and information on mining activities to the beneficiary communities.
- Information, training and support to public authorities on environmental governance, business and human rights due diligence and respect of international treaties on the matter, with the support of local universities.
- Training and strengthening of public officials' knowledge and respect for environmental regulations, the competences of municipalities and environmental monitoring.
- Promotion on land planning and shared local development initiatives.

2 More info on the Project is available at https://www.weworld.it/en/what-we-do/global-projects/alianza-de-oro-andean-experience-in-defense-of-human-rights-against-mining-activity.

3 Available at https://www.ohchr.org/sites/default/files/documents/publications/guidingprinciples-businesshr_en.pdf.

THE VOICE OF

Corrado Scropetta,

Country Representative for WeWorld in Peru

"Some of the main problems in Peru are guaranteeing the right to quality, safe drinking water and the adequate treatment of residual water. To solve them, we can work on different but connected levels always adopting a human-rights-based approach.
First, we need to mitigate the effects of climate change by promoting, on one hand, the implementation of works to restore the capacity of the territories to absorb water through water cycle management, and, on the other, the formulation, adoption and implementation of public policies through advocacy initiatives. This is also linked to the rational use of water, the promotion of sustainable agricultural systems and the reduction of pollution.
Moreover, we need to reduce water pollution to consequently reduce its negative effects on human health. In this case, it is necessary to generate a change on the big scale, namely by affecting public policies, rather than adopting specific actions on a small scale, even though they are necessary.
Finally, we need to adopt a prevention and emergency response, with a vision of nexus between emergency and development of public policies, since the country has the necessary resources to go down this path."

THE VOICE OF

Gianfranco Pintus,

Country Representative for WeWorld in Bolivia

"In developing the Alianza de Oro project, a project aimed at reducing the adverse effects of companies mining activities on the human rights of rural communities in Ecuador, Peru and Bolivia, it appeared that in the latter gold mining activities poison rivers with mercury, to the point that studies conducted in collaboration with the University of Cartagena on a representative sample of these communities (865 hair samples), revealed high levels of mercury contamination in the population. We have trained 546 people on human rights and mining-related health problems, especially on mercury contamination of populations directly exposed to it in river gold extraction areas.
Our intervention is aimed at carrying out awareness-raising activities to create an integrated health system, capable of ensuring efficient and effective responses to the needs of the most vulnerable populations in some departments of the country, characterised by limited access to quality health services and a general lack of professional and financial human resources invested in the sector.
We want to improve knowledge and understanding of the issue by the communities concerned, as well as dialogue between public opinion and the authorities. In addition, visits to healthcare facilities have made it possible to ascertain the status of active telemedicine points and to assess their needs and shortcomings. Therefore, access to primary healthcare has been enhanced through the strengthening of telemedicine services, training systems for local health workers and community awareness mechanisms for the promotion of healthy lifestyles."

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ADDRESSING THE NEEDS OF THE ANDEAN REGION

WeWorld works with communities in Peru and Bolivia, particularly in rural regions, to strengthen their ability to prevent and mitigate the consequences of climate change and mining operations on agricultural production and health. Indeed, these are the two main causes of vulnerability in the countries, because extractivism has negative environmental consequences and violates population human rights, particularly the right to health (due to high concentrations of heavy metals in the blood), and climate change has an impact on agro-pastoral activities and the water cycle.

WeWorld has gathered invaluable information via its interventions in the region, allowing it to develop the following WASH sector aims, to ensure that fundamental rights are upheld and community empowerment and resilience are enhanced:

Andean rural communities build resilience to face the consequences of climate change on agriculture, counteracting food insecurity and increasing land productivity, and the damages of mining activities.

In the South of Peru, 2023 has been the third consecutive year of drought, while in the northern part of the country heavy floods are expected to occur (in both cases, due to El Niño). Climate change has caused up to 70% loss of agricultural production and the Titicaca Lake recorded a lowering level of about 60cm. The country, whose economy is based on export, has an ambitious irrigation plan of coastal desert areas, taking water from the Amazon River basin. This way, **Peru has positioned itself on the world market as one of the main exporters of some agricultural products (asparagus, blueberries, avocados), at the expense of products of primary necessity for domestic consumption (mainly rice and wheat) putting their food sovereignty and security at risk**. Indeed, **as of 2022, 16,6 million people in the country were food insecure** (FAO, 2022).
Moreover, despite the persisting inequalities, its exposure to climate change related effects and its close dependence on natural resources, Peru is classified as an upper middle-income country since 2010, with a per capita income of $ 7,126 in 2022 (World Bank, 2022). Therefore, **international fundings for development projects and interventions are limited and not aligned with the actual needs of the population.**
To cope with this situation, it is essential to:

→ Adopt sustainable food systems by building nature-based solution as water-collecting plants based on the "siembra y cosecha" technique, which gathers and stores subterranean rainfall for future use. As a result, it is feasible to repair soil deterioration, increase soil water absorption capacity, and use water for the benefit of rural and urban areas.

→ Enhance rural communities' ability to successfully monitor the long-term management of their natural resources within the context of territorial development, as well as to avoid and mitigate water hazards and environmental concerns.

→ Encourage responsible and sustainable mining activities by encouraging adherence to existing agreements with communities and the state. This strengthens the government's involvement at all levels as the bearer of responsibilities and obligations to the population and mining businesses.

Indigenous rural communities build resilience to climate change by adopting new technologies, which increase land productivity, and diversify their sources of income. By reducing environmental threats to agricultural activities, they are no longer forced to migrate and to risk the progressive loss of their cultural identity and land management practices.

Indigenous communities in Bolivia have been disproportionally affected by climate change because of their dependence upon (and close relationship with) the environment and its resources, in particular water, also from a sociocultural perspective. Therefore, they need to adopt a multi-sectoral approach that includes **land and common property management, governance of public services, enhancement of cultural heritage, and local development through community tourism initiatives**. To reach this goal, WeWorld deems it necessary to:

→ Adopt a participatory approach to involve communities in the construction of systems of protection for agricultural fields from flooding. Specifically, involving them in the identification of intervention zones and in the implementation of the levee system by using ancestral techniques and tools.

→ Create hydro-meteorological stations in partnership with governmental bodies, such as the Bolivian National Meteorological Service and the Civil Protection Service. This enables the risk management of natural catastrophes through initiatives to avoid and increase community resilience in extremely vulnerable rural areas.

WASH in Nicaragua

FRAMING THE CONTEXT

WeWorld has operated in Nicaragua since 1984. Some regions of the country are extremely vulnerable to the effects of climate change, which have an impact on indigenous peoples' livelihoods in terms of access to water, sanitation and hygiene services, and human mobility. The effects of this crisis affect the entire population, with women and girls being particularly vulnerable and facing greater risks and challenges from a social and economic perspective.

Reduced water availability and poor water quality increase the risk of disease outbreaks such as cholera, diarrhoea, dengue fever, and malaria. Such consequences are not mitigated by adequate sanitation infrastructure: as of 2023, only 58% of healthcare facilities has access to basic water services, and this share drops to 39% in rural areas. In such areas, hygiene services are also lacking, with only 28% of facilities having access to basic hygiene services and more than two-thirds (68%) having access to limited hygiene services (WHO/UNICEF, 2023).

OUR ACHIEVEMENTS BETWEEN 2020-2023

672 family SCALLs (rainwater collection systems) installed

3,360 people reached

10 community seed banks built

Access to **safe drinking water** and **sustainable sanitation** increased in **9 communities**

14 schools, **6 healthcare facilities** and **1 polyclinic** reached

SECTORS OF INTERVENTION

Indigenous communities and afro descendent populations have access to WASH services and are trained on water management with a gender-sensitive and inclusive approach, thus building resilience to climate change while recovering from the effects of both health and climate emergencies. Schools are provided with resilient infrastructure as well, to guarantee children's safety and education even in case of emergency.

In 2020, two hurricanes (Eta and Iota) hit the North Caribbean Coast of Nicaragua, with significant repercussions for the indigenous communities living in the area. Most houses, schools, churches and other community centres were destroyed, and wells were contaminated, affecting the drinking water supply. **The conditions of water, sanitation and hygiene services in the area are alarming**: due to the scarcity of hygienic levels, there is a high spread of infections and mosquito-borne diseases, such as malaria and dengue fever. In 2022, Hurricane Julia hit the country, causing significant wind, surge, rain-induced flood damage and five deaths. One million people lost power during the hurricane which, according to the latest estimates, cost the Nicaraguan government 400 million dollars (National Hurricane Center, 2022).

This situation requires not only an immediate response to mitigate and contrast the effects of the emergencies but also communities' equipment to better respond to future health and climate shocks to increase their resilience, while also preserving the socio-cultural identity of indigenous communities. To achieve this twofold aim:

- → **14 schools, 6 healthcare facilities and 1 polyclinic in 9 communities benefitted from increased access to safe drinking water and sustainable sanitation** so that they could also be used as shelters in case of emergency.
- → Technical assistance for the **construction of 235 family SCALL** (Sistema de Captación de Agua de Lluvia)[1] **with 450L tanks** was provided.
- → Biointensive gardens and bio-planters at the family and school level were created, and infiltration wells were built, along with improved kitchens.
- → Hygiene and health measures have been adopted and hygienic products have been made available, especially for women and girls, such as reusable menstrual pads and pharmacy products.
- → **Families were trained** on the installation, the maintenance and the reparation of these systems, with particular attention to the inclusion of women and youth.
- → **4 schools were provided with SCALLs and new canteens.**
- → **4 schools in Laguna de Perlas have been provided with improved facilities for the preparation and/or distribution of safe food in emergency situations,** and for the distribution of school snacks. Such infrastructures are complementary with the installation and improvement of water collection and distribution systems which guarantee safe water and hygiene for the preparation of food and for the consumption of educational communities and, in case of emergency, provide safe water for the preparation of food for the sheltered people. In addition, people involved in children's education (families, members of community, teachers, etc.) participated in workshops awareness about WASH and food security. **Community leaders were trained** on water quality control and monitoring.
- → **Awareness-raising activities**, in Spanish and Miskito (the indigenous language), were carried out at both household and community level, covering different topics, such as the importance of handwashing and dengue and malaria ways of spreading.
- → **Ancestral knowledge on the relationship between the community and the territory was preserved and used to implement community micro-projects** for the management of water resources, with a focus on the participation and leadership of poor people and afro descendant women and youth[2].
- → **10 community seed banks were built** and training sessions for their operational and financial management were organized for the management team of each bank.
- → Seeds, plants and farming tools were provided.

1 Rainwater Collection System.

2 The aims of the projects were improving access to drinking water, ensuring an efficient use of water, and strengthening resilience, social cohesion and the protagonism of those social groups who are generally excluded from the governance systems.

Women empowerment and economic independence are promoted at both individual and community levels, by providing gender-based violence survivors and their families with medical, legal and psychological assistance, and by enhancing community-based prevention of gender-based violence through menstrual hygiene management and sexual and reproductive health campaigns.

Menstrual health and hygiene promotion is a starting point for addressing greater issues such as gender equality and women's empowerment, sex education, sexual and reproductive health and rights, early marriages, and so on. These interventions will empower girls and women by assisting them in avoiding gender-based violence (GBV) and, at the same time, will break down taboos around menstruation, beginning with education and awareness-raising activities. Indeed, education has a vital role in teaching non-discriminatory gender roles as well as cross-sector coordination with the health and water sectors to make menstrual hygiene management access a universal service available to all girls. For this purpose:

- → **Women who experienced gender-based violence were involved in 2 Couture Labs for the manufacturing of underwear pads**, created in collaboration with a local designer, thus acquiring new skills to take care of themselves and of their children, generating opportunities for economic independence and involving the entire community in a process of behavioural change.
- → **Groups of female leaders, school and medical centres personnel were trained** on menstrual hygiene management and sexual and reproductive health, using material and methodologies which have been adapted to the **local indigenous context**, so that the awareness session would have adapted to the local culture and targets. Using this approach, **communitarian and barrios activities were carried out** too, with groups of teenagers (10-18 years old), both male and female, about their sexual and reproductive health and menstrual hygiene management.
- → **Menstrual Hygiene Management focus groups were organised with vulnerable people, such as local female fishers and maternal house hosts** (health institutional shelter for pregnant and newly-mums) to create spaces where young women, girls and teenagers could get aware about their sexual and reproductive health and menstrual hygiene management.
- → **WASH-in-home systems for victims of violence were rehabilitated** and basic hygiene products and water dispensers were provided to support centres for victims of gender-based violence.
- → **Awareness-raising activities, such as women's health fairs, were implemented** to inform and educate about menstruation, its effects and related taboos, using games, theatre sketches, stands and openly speaking with local authorities.

THE VOICE OF

Tiziana Rossetti,
Coordinator (Central America and Caribbean) for WeWorld in Nicaragua

"The Caribbean region has various restrictions to guarantee water and health of its inhabitants because of insufficient infrastructure, limited economic resources and exposure to the effects of climate change. These vulnerabilities are particularly evident in rural areas, where indigenous, afro descendant and agricultural communities have less access to these basic services. Within these communities, women and people with disabilities face obstacles due to the lack of a gender perspective and inclusive approach in the design and management of such services.

To promote women's empowerment and gender equality, as well as people with disabilities' rights, we carry out several activities: rehabilitation of sanitation systems with gender sensitive and inclusive design, which guarantee accessibility, privacy and comfort for users; production of ECO-PADS, made by entrepreneurial women with local materials; establishment of support funds for entrepreneurial women in neighbourhoods and communities, which allow them to generate their own income and improve their economic conditions; training on self-esteem, self-care, women's role in disaster risk management and gender based violence prevention.

However, there are still many challenges for the achievement of gender equality: the public budget allocated to WASH should be increased with a gender perspective; cultural, social and economic barriers that limit access and equitable use of water and sanitation by women and girls should be eliminated; women's technical and organizational capacities should be strengthened; and dialogue and coordination between different actors involved in WASH, including local authorities and communities, should be further promoted."

WASH in EURASIA

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Overview

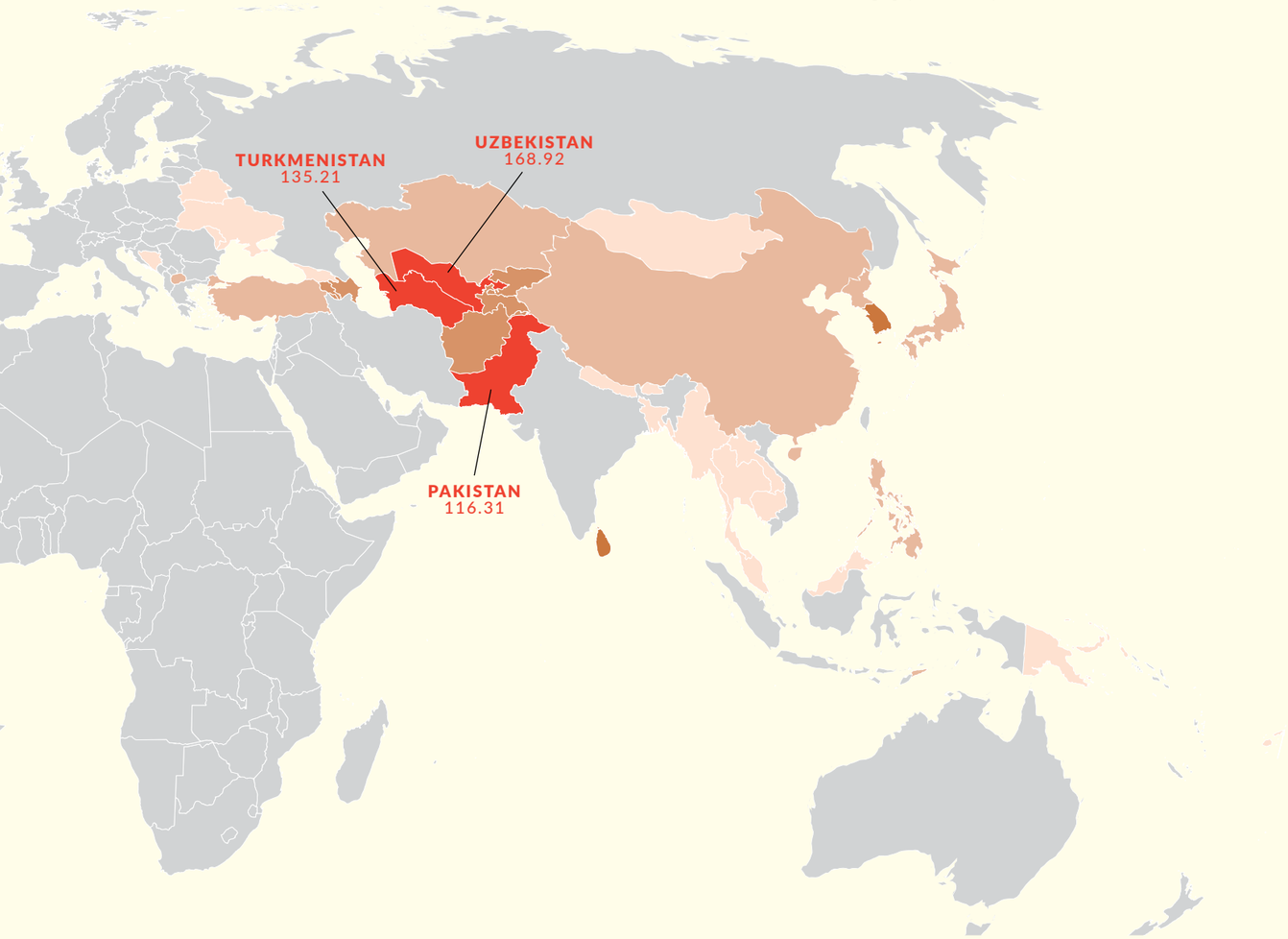
LEVEL OF WATER STRESS IN EURASIA (%)

Source: FAO AQUASTAT 2023

LEVEL OF WATER STRESS (%)

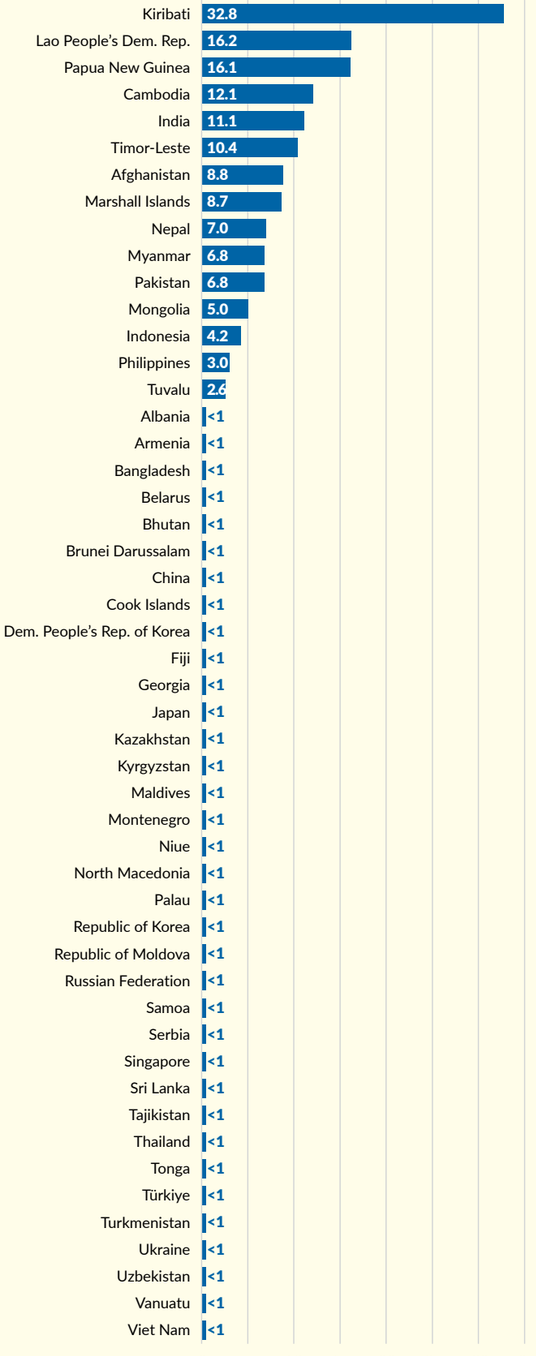
N/A	
0-25	No stress
25-50	Low stress
50-75	Medium stress
75-100	High stress
>100	Critical stress

Freshwater withdrawal as a proportion of available freshwater resources. Data is updated to 2020. The classification of the geographical areas responds to WeWorld elaboration.



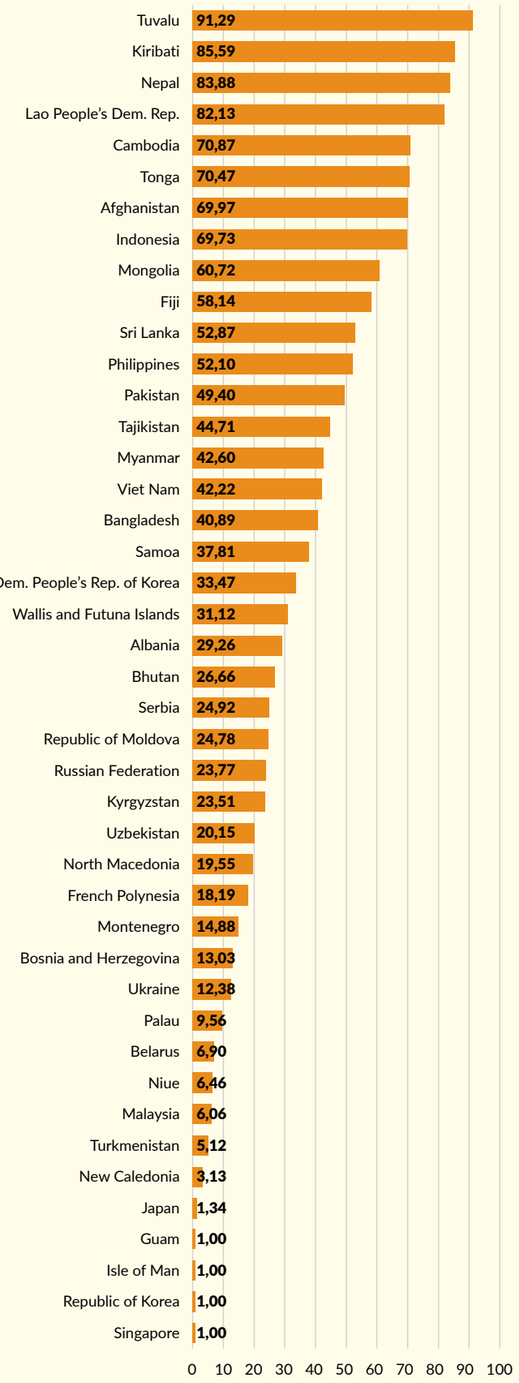
POPULATION FORCED TO RESORT TO OPEN DEFECATION IN EURASIA(%)

Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



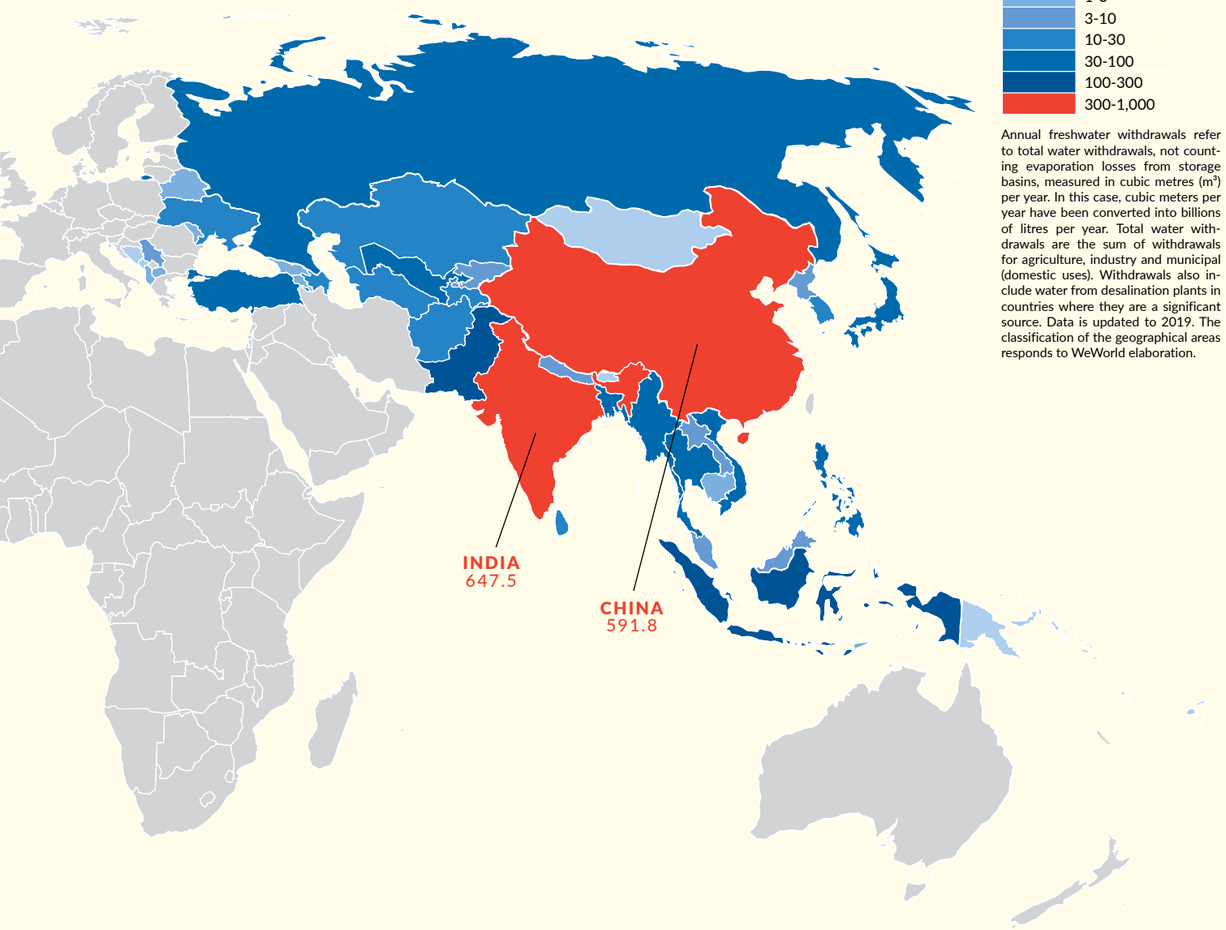
PEOPLE WITHOUT ACCESS TO SAFELY MANAGED WATER IN EURASIA

Data is updated to 2022. Only countries with available data are reported.
Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



ANNUAL FRESHWATER WITHDRAWALS (BILLIONS LITRES) IN EURASIA

Source: FAO AQUASTAT 2023



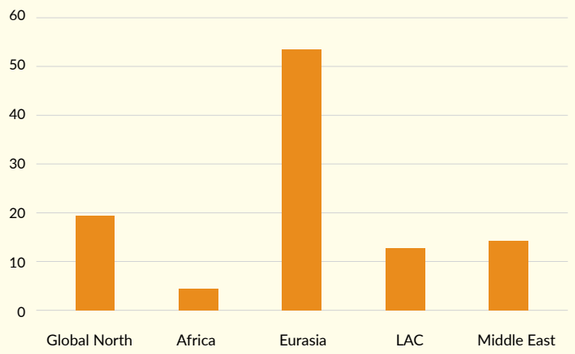
ANNUAL FRESHWATER WITHDRAWALS (BILLIONS LITRES) IN EURASIA

- 0-0,5
- 0,5-1
- 1-3
- 3-10
- 10-30
- 30-100
- 100-300
- 300-1,000

Annual freshwater withdrawals refer to total water withdrawals, not counting evaporation losses from storage basins, measured in cubic metres (m^3) per year. In this case, cubic meters per year have been converted into billions of litres per year. Total water withdrawals are the sum of withdrawals for agriculture, industry and municipal (domestic uses). Withdrawals also include water from desalination plants in countries where they are a significant source. Data is updated to 2019. The classification of the geographical areas responds to WeWorld elaboration.

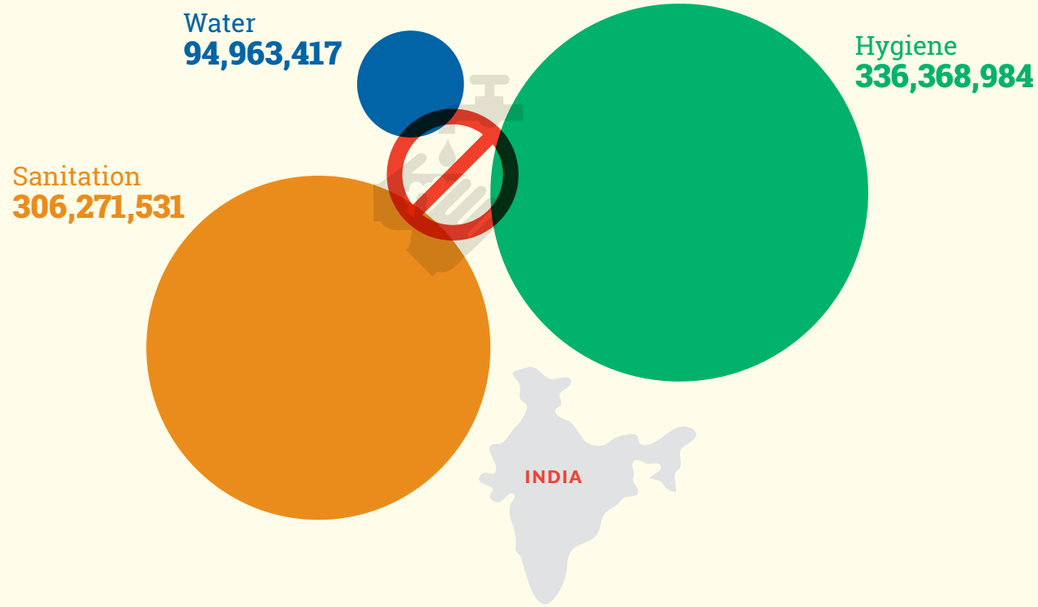
ANNUAL FRESHWATER WITHDRAWALS (BILLIONS LITRES)

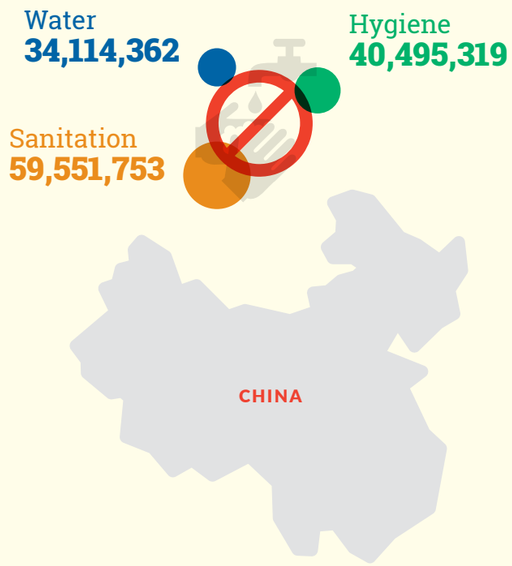
Source: FAO AQUASTAT 2023



PEOPLE WITHOUT ACCESS TO BASIC WASH SERVICES IN THE TWO MOST POPULATED COUNTRIES IN THE WORLD

Data is updated to 2022. Source: WHO/UNICEF 2023





WASH in Cambodia

OUR ACHIEVEMENTS BETWEEN 2020-2023

15 food and hygiene materials distributed to vulnerable children **in schools** (in Varin province) as emergency support for COVID-19

130 vulnerable children reached

29 schools supported with teaching materials, hygiene materials, trainings, scholarship and emergency support to the vulnerable children (in Varin province)

11,286 children reached

5 latrines and toilets built (in Varin province)

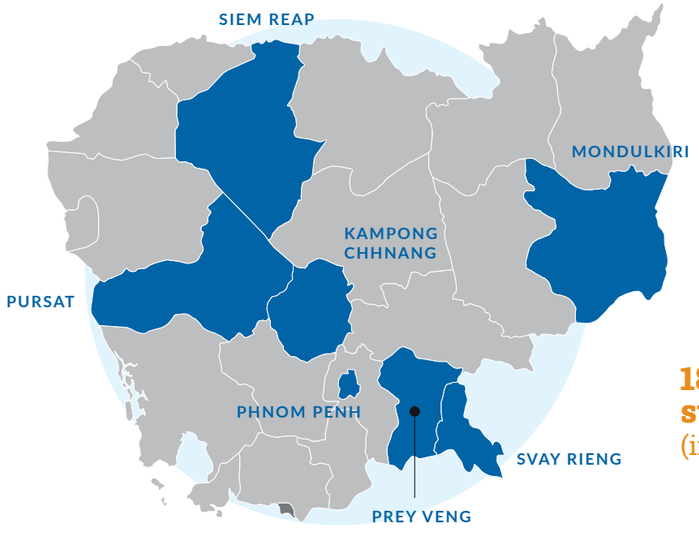
1,300 people reached

3 water depots built (in Varin province) for handwashing and drinking

1,890 people reached

2 awareness-raising campaigns on school enrolment, handwashing, and COVID-19 carried out (in Mondulkiri province)

3,450 parents and members of community reached



1 artesian well built (in Varin province)

2,384 people reached

18 handwashing stations constructed (in Varin province)

8,689 people reached

SECTORS OF INTERVENTION

Children's access to equitable and inclusive education is reinforced by creating a safe and healthier learning environment, thus preventing school drop out of vulnerable children in rural communities.

Upgrading WASH services in schools is critical to the health and education of children, who spend a substantial amount of their daytime at school, where WASH services can increase educational opportunities and reduce disease transmission. For children from poor or geographically or socially marginalised communities, specifically, improving such services is critical to eliminating inequalities and providing them with the opportunity to attend safer and healthier schools, just as it is for children from less disadvantaged areas. To eradicate such inequalities:

- → **Educational institutions were supported** in the correct maintenance of both drinking water and toilet wash systems, through specific training and restructuring material.
- → Teaching material for the promotion of hygiene in pre-primary classes was distributed.

WASH and CHILDREN'S RIGHTS

WASH and HEALTH

WASH and COMMUNITY-RESILIENCE

WASH and BEHAVIOURAL CHANGE

- → **168 children from 6 pre-primary schools and 3,047 children from 12 primary schools were provided with breakfast at schools** to boost their school attendance.
- → **Child protection activities were carried out in school boards to increase the awareness of children's rights and their potential violations**, through the collaboration with the Commune Committee for Children and Women and the organisation of monthly meetings, as well as the coordination of the local child protection network, which is aimed at strengthening community capacity in child protection in emergencies and in the management of cases of abuse and violence.
- → Menstrual Hygiene Management kits were distributed.

FRAMING THE CONTEXT

WeWorld has operated in Cambodia since 2009, supporting basic education and reducing the phenomenon of school absenteeism, which involves especially children belonging to the most vulnerable families in rural areas. Indeed, deep inequalities between urban and rural regions in accessing basic services impede the exercise of the right to health and to education of children coming from disadvantaged situations.
As of 2023, 73% of rural households has access to at least basic drinking water service, against 94% of urban ones, and less than one third (29%) of the population has access to safely managed water, with more than half of it (55%) using non-piped drinking water (WHO/UNICEF, 2023).
Access to basic water, sanitation and hygiene services is not secured in the national school system either, especially for schools in rural communities: 75% of schools has access to basic drinking water service, but almost 1 out of 4 (24%) has limited water service or no water service at all and access to basic sanitation service is inadequate as well, since more than 2 rural schools out of 3 (68%) has limited access to such service or no sanitation facilities at all (ibid.).

THE VOICE OF

Andrea Cefis,
Country Representative for WeWorld in Cambodia

"Many schools have municipal water pipes but taps and toilets are insufficient (4 bathrooms for 200 children). Some rural schools do not have a municipal water supply and tankers transport water to school storage tanks. In recent years we have contributed to the construction of wells in rural schools and the construction of small water systems for handwashing and latrines. Furthermore, We World carries out awareness-raising activities: depending on the context and type of intervention we hold courses on hygiene practices, the use of materials for cleaning hands and the correct use of toilets. We work together in the school to keep the toilets and sinks efficient, providing building materials while the schools work to find local labour for maintenance. Furthermore, knowing that the effects of the lack of clean water and adequate sanitation are felt most by women and girls, we distribute menstrual hygiene kits for girls and hygiene kits for vulnerable children."

WASH in Ukraine

OUR ACHIEVEMENTS BETWEEN 2020-2023

142,966 people reached by **potable water storage**

Medical kits distributed

1,958 people reached

A total of **8 water systems** rehabilitated **in 7 communities**, including water towers and water networks

3,340 children have attended **Child-Friendly Spaces** with safe WASH facilities

WASH services improved in 9 healthcare facilities

9,000 people received food and non-food **winterization kits**, including hygiene items

5,213 people have benefited from a multi-purpose **cash assistance**

Specific **hygiene kits** distributed

A total of **750 households** reached

369,758 people have been **reached by our intervention** since the outbreak of the conflict

FRAMING THE CONTEXT

WeWorld launched its humanitarian response in Ukraine immediately after the outbreak of the Russian invasion on February 24, 2022. The systematic targeting of key civilian infrastructure, such as electricity, heating, healthcare, and water networks, over two years war, has further exacerbated the needs of conflict-affected populations. Such a scale of damage has inevitably taken its toll on quality of life, particularly in the North-Eastern and Southern Ukraine, severely limiting or completely hindering people's access to essential WASH and healthcare services. At the end of 2022, damages to the electricity and water network left approximately 16 million people without safe water for consumption, waste management, heating, sanitation, or hygiene solutions (OCHA, 2023b).

Many healthcare facilities (HCFs) stopped functioning due to substantial damages incurred during missile strikes or shelling. Consequently, those HCFs that managed to continue their operation were often forced to increase their services' costs while battling a severe lack of qualified medical staff due to conflict-spurred displacement and of medication and equipment due to looting. In the frontline areas, such as Donetsk, Mykolaiv and Kherson, 30% of the population meet barriers to accessing healthcare services, 28% of households without access to healthcare face an unaffordable cost of consultation/service and 23% an unaffordable cost of medication (Data Friendly Space, 2023). Lastly, WASH services in healthcare facilities have also been significantly hampered, increasing health risks.

SECTORS OF INTERVENTION

WASH and CHILDREN'S RIGHTS

WASH and COMMUNITY-RESILIENCE

WASH and INCLUSION

Resilience of the most vulnerable communities is strengthened through access to safe water supply, sanitation and hygiene items.

In Ukraine, war operations have destroyed more than 1,000 km of water network. As of the end of 2023, the national water and sanitation system is on the brink of collapse, **leaving 6 million people without safe and drinking water, and 9.6 million people in need of WASH assistance** (UNICEF, 2024b). **12 million people have no or limited access to energy** (UNDP, 2023a). Thus, millions of people are currently living in unsanitary conditions, lacking medicines, water, adequate personal and private spaces, and access to heating. Of these, **3.67 million are internally displaced** (OCHA, 2023b). Local WASH providers are unable to cope with heightened requests for repairs due to inadequate financial and material resources to cover the entire extent of the damages incurred during the conflict. Many areas with the most vulnerable populations, especially with high percentage of the elderly, persons with disabilities (PwDs), chronically ill, internally displaced people (IDPs), women and children, remain underserved by basic goods given their proximity to the frontline.
To support the affected population in Ukraine, WeWorld has been implementing the following activities:

- Lack of water has been addressed through **reparation of 8 decentralized water systems** (pumping stations, water tower reservoirs, distribution pipelines and fitting) and the **deployment of water containers, addressing the needs of IDPs and residents in the front-line rural communities.** These activities aimed to create conditions conducive to the return of IDPs and enhance the overall quality of life for all residents, with **special attention given to vulnerable groups such as the elderly and Persons with Disabilities (PWDs)**.
- Provision of services through local water providers, such as Vodakanal and Municipalities, has been strengthened through **operation & maintenance training of key staff and provision of spare parts and tools for future emergency repairs.**
- Resilience of at least **12,000 displaced persons**, currently housed in shelters or accommodation centres, has been reinforced **through direct economic support in the form of multi-purpose cash assistance, and provision of food and non-food kits** (including **hygiene items** tailored to specific needs, clothing, bedding, kitchen sets and cooking fuel).
- **5,000 families were able to cope with extremely low winter temperatures thanks to winterization kits** (warm blankets and heaters) **and warm clothes**[1].
- **3,340 children have attended four new Child-Friendly Spaces**, where, thanks to light **rehabilitation of structures and WASH facilities**, the assistance of animators and social workers, recreational activities have been implemented, **together with psycho-social support and health recovery support.**

1 Data below belong to the Ukrainian Emergency Response realised by WeWorld. More information at: https://www.weworld.it/en/what-we-do/global-projects/ukraine.

Healthcare facilities (HCFs) can address sanitary emergencies and prevent the potential spread of epidemics through improved availability and quality of WASH services.

The healthcare sector in Ukraine has been severely impacted by the war: since Russia's full-scale invasion, **there have been 1,351 total attacks on healthcare facilities**, making access to adequate care more difficult (PHR et al., 2024). In addition, as healthcare facilities mostly rely on the public grid for energy, and this has been seriously damaged, consequently water supply, sewage systems and heat systems have been severely damaged or destroyed with public infrastructure been strained, limiting access to and quality of WASH services in HCFs. All of this **limiting access to medical care in appropriate facilities, and elevating the risk of the spread of potential epidemic waterborne connected diseases**, as exemplified by the hepatitis outbreak in Vynnitsya. To cope with this situation:

- → **A WASH in health assessment tool based on the UN WASH FIT tool**[2] (Water and Sanitation for Health Facility Improvement Tool, a risk-based, quality improvement tool for healthcare facilities, covering key aspects of WASH services) **has been created and adapted** to the Ukraine context to identify multidimensional WASH gaps in healthcare facilities. In addition, a high-level event on Water Safety Planning and the WASH-FIT framework for health centres is planned to be organized in 2024 with the support of UNICEF.
- → **WASH FIT training has been organised for healthcare staff in targeted facilities** to quantify their achievement, measure progress and map further support needed to improve the quality of their services.
- → **WASH services in 9 healthcare facilities** (ambulatories, primary healthcare facilities, hospitals, or other medical facilities) have been improved, with the rehabilitation and construction of inclusive toilets and handwashing points, repairs of water heating and wastewater systems, and the general rehabilitation of the infrastructures thus improving their operation and maintenance capacity, with a **gender-sensitive, inclusive and child-friendly focus.**
- → Health and WASH emergency has been mitigated through **the distribution of medicine and medical kits to the population, of cleaning kits for the hospital and tailored hygiene kits for the most vulnerable (women, children, PWDs and elders).**

2 For consulting the WASH FIT tool, see: https://www.who.int/publications/i/item/9789240043237.

WASH and HEALTH

THE VOICE OF

Giovanni Pedron,

WASH Programme Manager, Ukraine

"Approximately 11 million Ukrainians are in urgent need of Water, Sanitation, and Hygiene (WASH) assistance, primarily due to disrupted water and sanitation supplies as well as damaged water, energy, and wastewater infrastructure. WeWorld is actively involved in supporting water utility companies to ensure water security and functionality. The organisation is focused on the rehabilitation of decentralised water systems, including pumping stations, water tower reservoirs, distribution pipelines, and fittings. These initiatives aim to create conditions conducive to the return of internally displaced persons (IDPs) and enhance the overall quality of life for all residents, with special attention given to vulnerable groups such as the elderly and persons with disabilities (PWD). This multifaceted approach not only addresses immediate WASH needs but also contributes to the broader goal of community resilience and sustainable development.

Ukraine has made significant strides in expanding primary healthcare (PHC), despite the ongoing conflict. Recent health financing reforms have prioritised the improvement of PHC, implementing measures to enhance services and quality, with a specific focus on water, sanitation, and hygiene in health services. However, challenges persist, as indicated by WHO data from selected facilities in eastern and southern Ukraine, revealing that only 44% (and as low as 26% in specific areas) meet the WHO standards for WASH services. The winter season, the scarce quality of WASH services (at the healthcare facility and community level), and the prevailing crisis in Ukraine pose an elevated risk of the spread of epidemic-prone diseases (such as measles, gastrointestinal issues, rotavirus, cholera, poliomyelitis, diphtheria, and tuberculosis), as exemplified by the hepatitis outbreak in Vynnitsya. WeWorld has expertise and experience in WASH health interventions and promoting awareness regarding water scarcity and public health risks. Recently, the organisation rehabilitated nine primary healthcare facilities, improving WASH services, including operation and maintenance capacity building."

THE VOICE OF

A recipient of WeWorld WASH assistance in Kalynove,

Kharkiv [name not mentioned for protection purposes]

Kalynove is a small village in north-eastern Ukraine, located north of Kharkiv and only a few dozen kilometres away from the border with Russia. After the beginning of the full-scale invasion in February 2022, the area was temporarily occupied by Russian troops and was only liberated in mid-May 2022. Ever since then, however, the village has been under constant attack and shelling.

"The first rocket hit the forest, then another to the forest. My wife says, 'Let's go down'", recalls a resident of the village. He is referring to one of the many strikes that hit the area, which wreaked havoc and destroyed houses and other civilian facilities.

The man was with his wife when the attack started, and they rushed to the basement to take shelter from the missiles. They were there when the door of the basement was blown out by a missile that hit their kitchen. *"We put polystyrene here, and with my wife, we stayed for two months."* Two months sheltered in a basement, under daily shelling, as the whole village was left without water for a whole year due to the destruction of the water tower and without an ambulatory to guarantee basic medical assistance to residents.

"What I hope for the future is a better life," says the man as he watches damaged buildings in the village and the rehabilitation works carried out. A better life, the restoration of facilities, and, ultimately, a normal life.

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WASH in Moldova

OUR ACHIEVEMENTS BETWEEN 2020-2023

10,128 hygiene kits distributed both to **refugee centers** and **private accommodation**

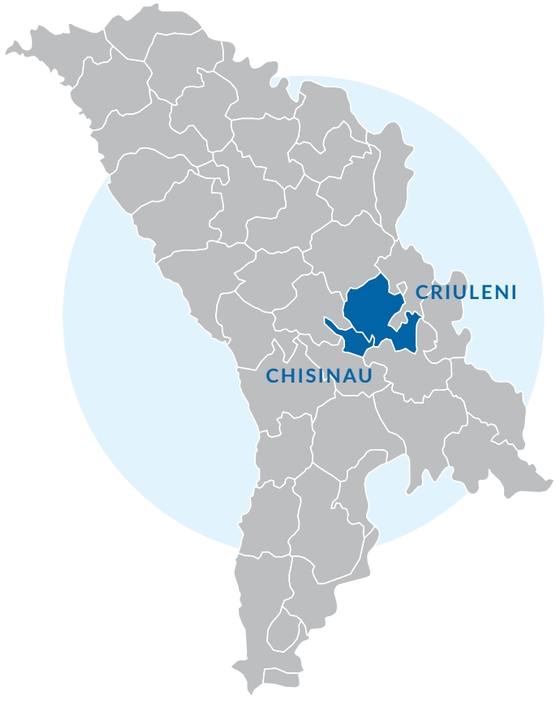
3,050 children participated in **educational and recreational activities,** including sessions to improve **handwashing**

7,000 people have weekly received **food and basic goods**

FRAMING THE CONTEXT

WeWorld has been operating in Moldova since March 2022, when thousands of Ukrainians arrived in the country to escape the Russian invasion. Since the beginning of the conflict, 974,151 people from Ukraine have crossed the border in search of a safe place. Currently, 113,183 refugees have remained in the country, the large majority being girls and women (60%) and children (49%) (UNHCR, 2023).

In Moldova, the greatest difficulties Ukrainian refugees continue to face are access to sustainable housing and healthcare services. At the end of 2022, 18% of refugees lived in unfinished housing, not provided with adequate WASH facilities and heating, while, up to September 2023, about 1 out of 3 refugees experienced difficulties in accessing sanitation and hygiene services due to long waiting times and inability to afford medical fees (and associated fees) (ibid.). In addition, low winter temperatures make the number of people in need of humanitarian assistance further increase. Data shows that, in 2022, 52,000 refugees and 92,000 Moldovans needed winterization items and support (NRC, 2022).



SECTORS OF INTERVENTION

The potential spread of waterborne and infectious diseases is prevented through the promotion of good hygiene practices, while the effects of low temperatures are mitigated distributing winterisation materials.

In Moldova, WASH needs are primarily related to **inadequate access to healthcare services, poor sanitation, hygiene practices and cold winter temperatures**. The lack of proper sanitation facilities could contribute to waterborne diseases like diarrhoea, while inadequate hygiene practices, including limited access to handwashing facilities, heighten the risk of infectious diseases. These issues primarily affect the most vulnerable groups, including the thousands of Ukrainian refugees who have reached the country, that are also **strongly in need of housing sufficiently provided with heating and WASH facilities, especially in view of winter**. For this reason:

- → **6,000 hygiene kits, designed for targeted groups - children (4-10 years old), girls and women, boys and men- to accommodate specific age and gender needs, have been distributed in central and rural areas**, while cleaning materials have been provided to refugee accommodation centers, like the one in Testimitanu (Chisinau), to ensure the provision of hygiene and cleaning products.

WASH and CHILDREN'S RIGHTS

WASH and HEALTH

WASH and GENDER EQUALITY

WASH and COMMUNITY-RESILIENCE

- → **1,000 refugees** have strengthened their response to falling temperatures thanks to the **distribution of winter kits**.
- → **Teenage refugees** (13-17 years old) have taken part **in education sessions** on menstrual health, including **menstrual hygiene management**, to empower girls and women to manage their periods **safely and with dignity**, reducing absenteeism from school or work, while also **educating boys and men on the importance of menstrual health, fighting taboo and stereotypes.**
- → Around **50 children**, housed in Riscova, have been involved in **educational activities** during the Global Handwashing Day, **including sessions to improve handwashing through workshops and games, aiming to reduce the spread of diseases.**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Ukrainian refugees, together with the Moldovan community, cope with the humanitarian emergency and take part in activities that strengthen integration and social cohesion.

Due to the full-scale invasion of Ukraine started in 2022, Moldova is suffering from a **high rate of inflation**[1] **and rising energy prices**[2], which, added to the humanitarian emergency, impacts the living conditions of both Moldovan citizens and refugees, **making access to basic goods, medical supplies and WASH services even more difficult**. Therefore, for the well-being of both Ukrainian refugees and the Moldovan population, the humanitarian support sought not only to **ensure the provision of essential goods**, such as housing, sanitary supplies, drinking water, heating, etc. but also to **promote integration-focused actions that may have a positive impact on the entire society**. To do this:

- **Ukrainian refugees have been involved in organizing and delivering food and basic goods coming mostly from local small producers to support Moldovan local economy**, together with strongly fostering integration and social cohesion. The distribution has served about **7,000 people weekly**.

1 The annual inflation rate in Moldova slowed further to 8.63% in September 2023, marking the lowest level in two years, from 9.69% in the previous month. However, the rate remained above the central bank's mid-point target of 5.0% (Trading Economics, 2023).

2 In 2022, prices increased sevenfold for natural gas and 400% for electricity. As a result, more than 70% of the households in the country are now energy-vulnerable and spend more than 10% of their incomes on energy, in particular on heating during the cold period (UNDP, 2023b).

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WASH and CHILDREN'S RIGHTS

WASH and BEHAVIOURAL CHANGE

WASH and GENDER EQUALITY

WASH and COMMUNITY-RESILIENCE

- **3,000 children refugees attended 2 Child-friendly Safe Spaces** in refugee accommodation centers, fully equipped and furnished, including light rehabilitation of structures. In these spaces, educational and recreational activities are provided by trained educators to offer opportunities for children and adolescents to **play, rest, interact, receive psychosocial support and strengthen their resilience facing adversities.**
- Adults and children have participated in **education activities on sexual exploitation**, abuse and sexual harassment (SEAH), gender-based violence (GBV) and trafficking and child protection, **to prevent and combat gender-based violence and child sexual abuse** during humanitarian emergencies.
- To promote integration between refugees and the local population, as well as to reinforce social cohesion and to make interventions having a positive impact on the whole community, **all humanitarian activities have included the active involvement of refugee population together with host communities.**

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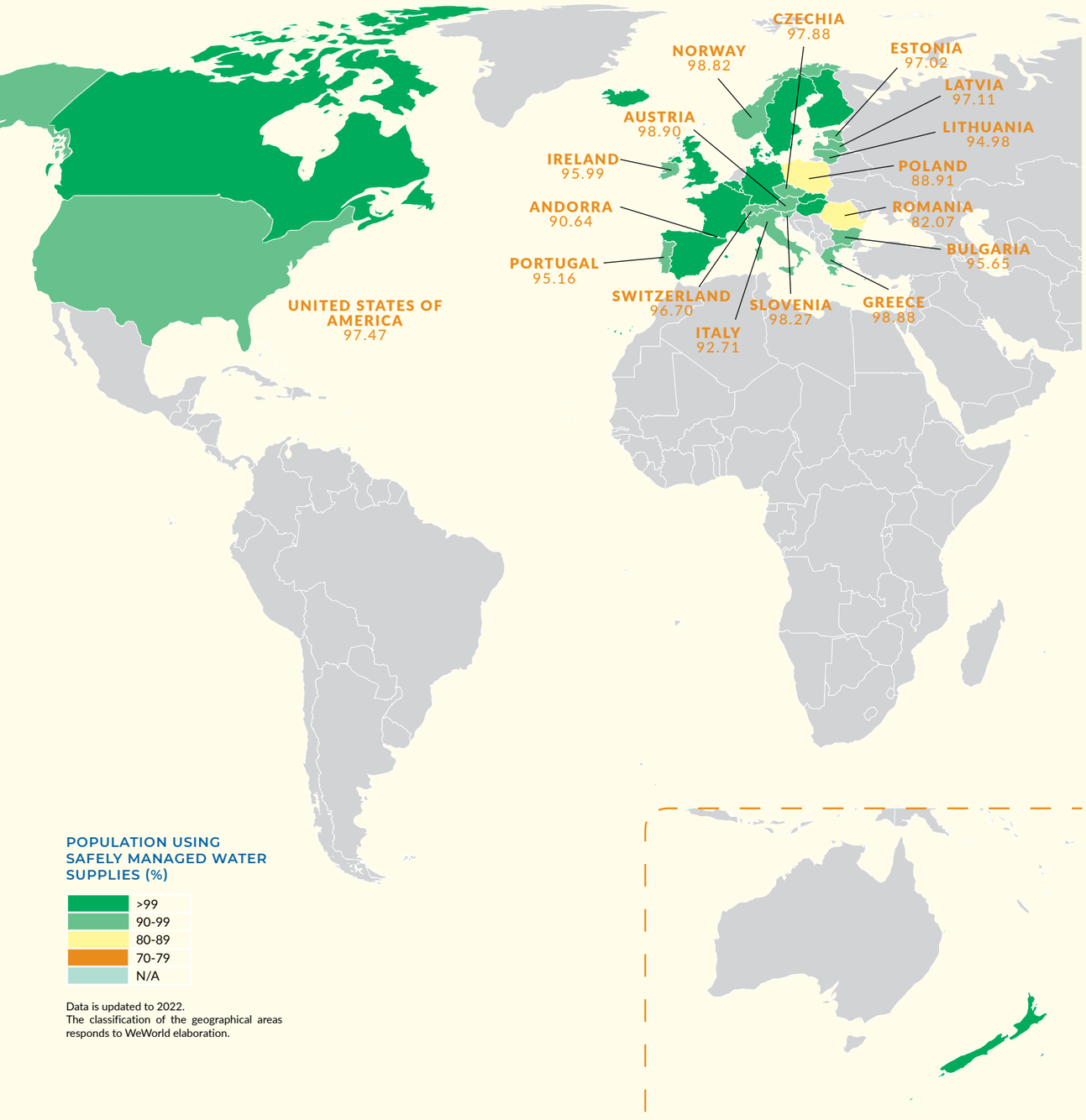
WASH in the GLOBAL NORTH

© Jacob Lund/Alamy Stock Photo

Overview

POPULATION USING SAFELY MANAGED WATER SUPPLIES (%)

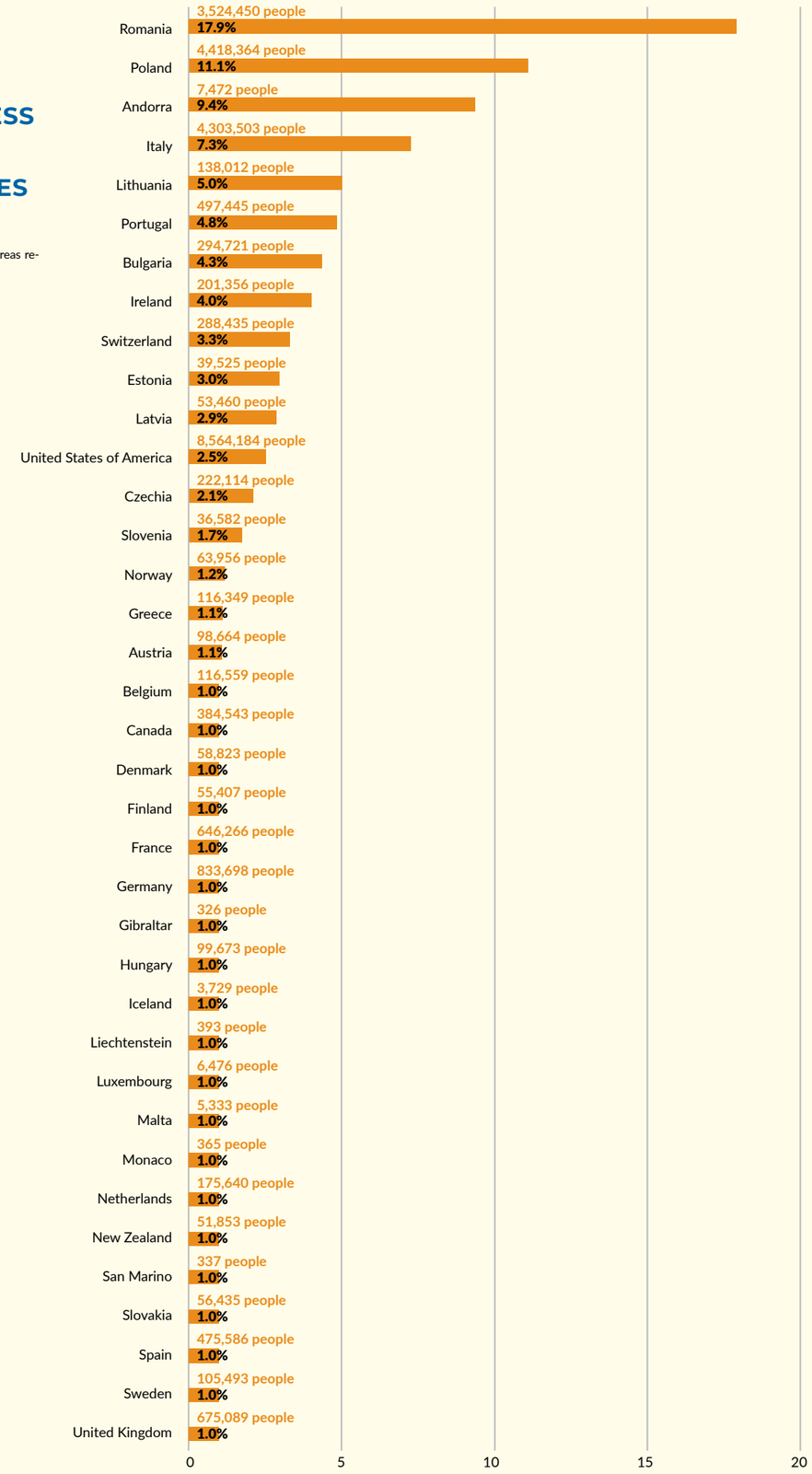
Source: WHO/UNICEF 2023



Data is updated to 2022.
The classification of the geographical areas responds to WeWorld elaboration.

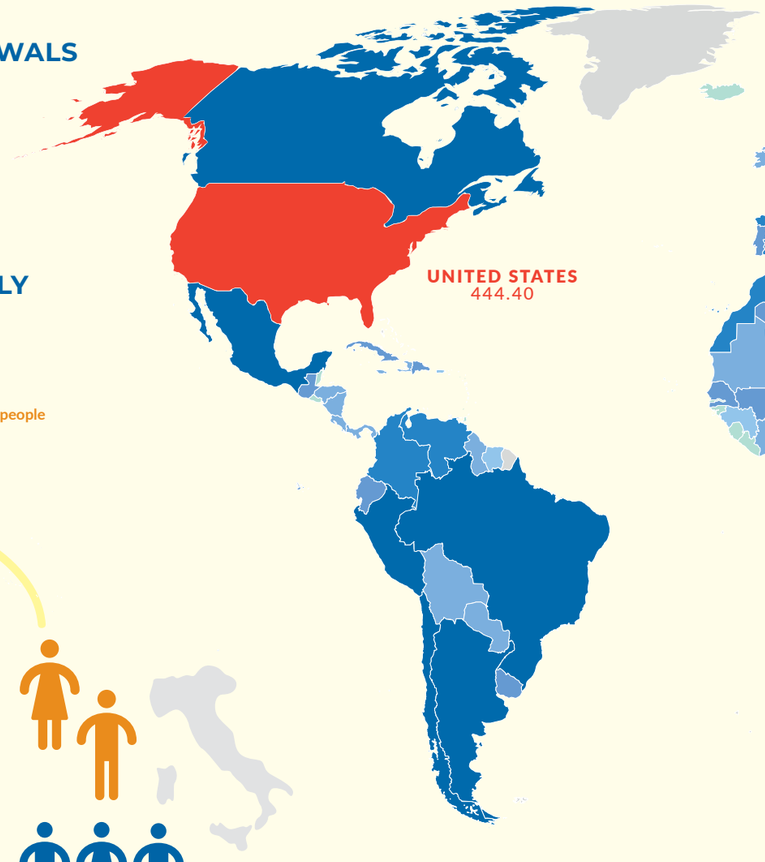
PEOPLE WITHOUT ACCESS TO SAFELY MANAGED WATER SERVICES

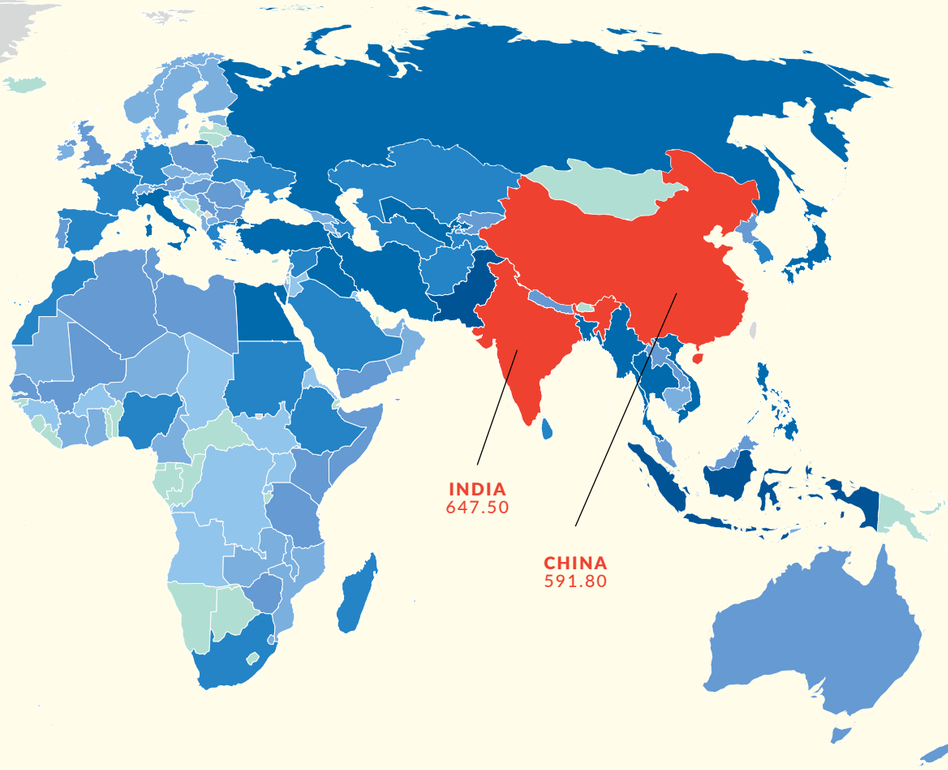
Data is updated to 2022.
Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



ANNUAL FRESHWATER WITHDRAWALS (BILLIONS LITRES) IN THE GLOBAL NORTH

Source: FAO AQUASTAT 2023





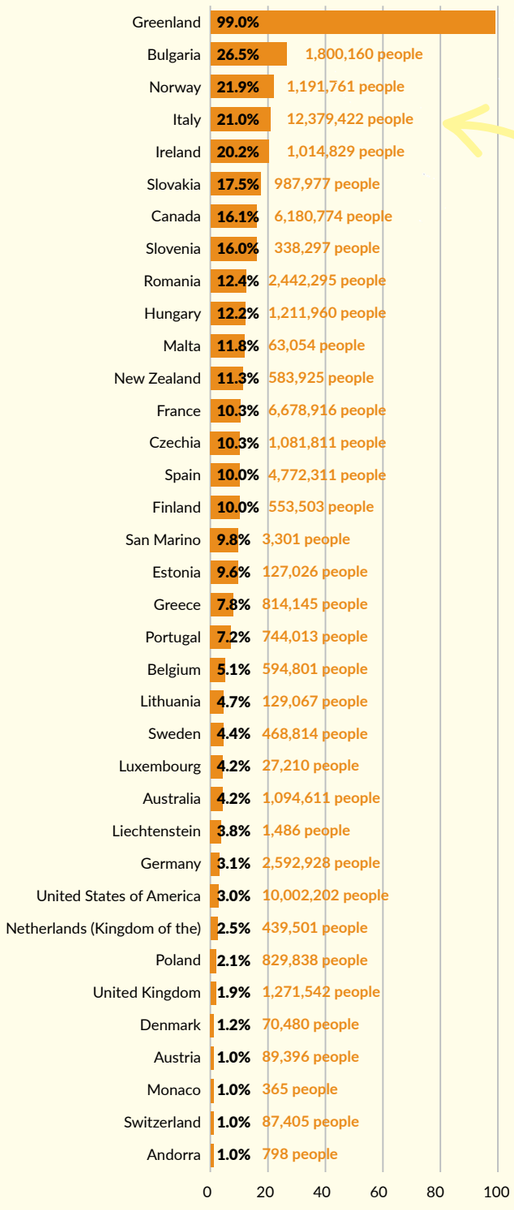
ANNUAL FRESHWATER WITHDRAWALS (BILLIONS LITRES) IN GLOBAL NORTH

- N/A
- 0-0,5
- 0,5-1
- 1-3
- 3-10
- 10-30
- 30-100
- 100-300
- 300-1,000

Annual freshwater withdrawals refer to total water withdrawals, not counting evaporation losses from storage basins, measured in cubic metres (m^3) per year. In this case, cubic meters per year have been converted into billions of litres per year. Total water withdrawals are the sum of withdrawals for agriculture, industry and municipal (domestic uses). Withdrawals also include water from desalination plants in countries where they are a significant source. Data is updated to 2019.

PEOPLE WITHOUT ACCESS TO SAFELY MANAGED SANITATION SERVICES

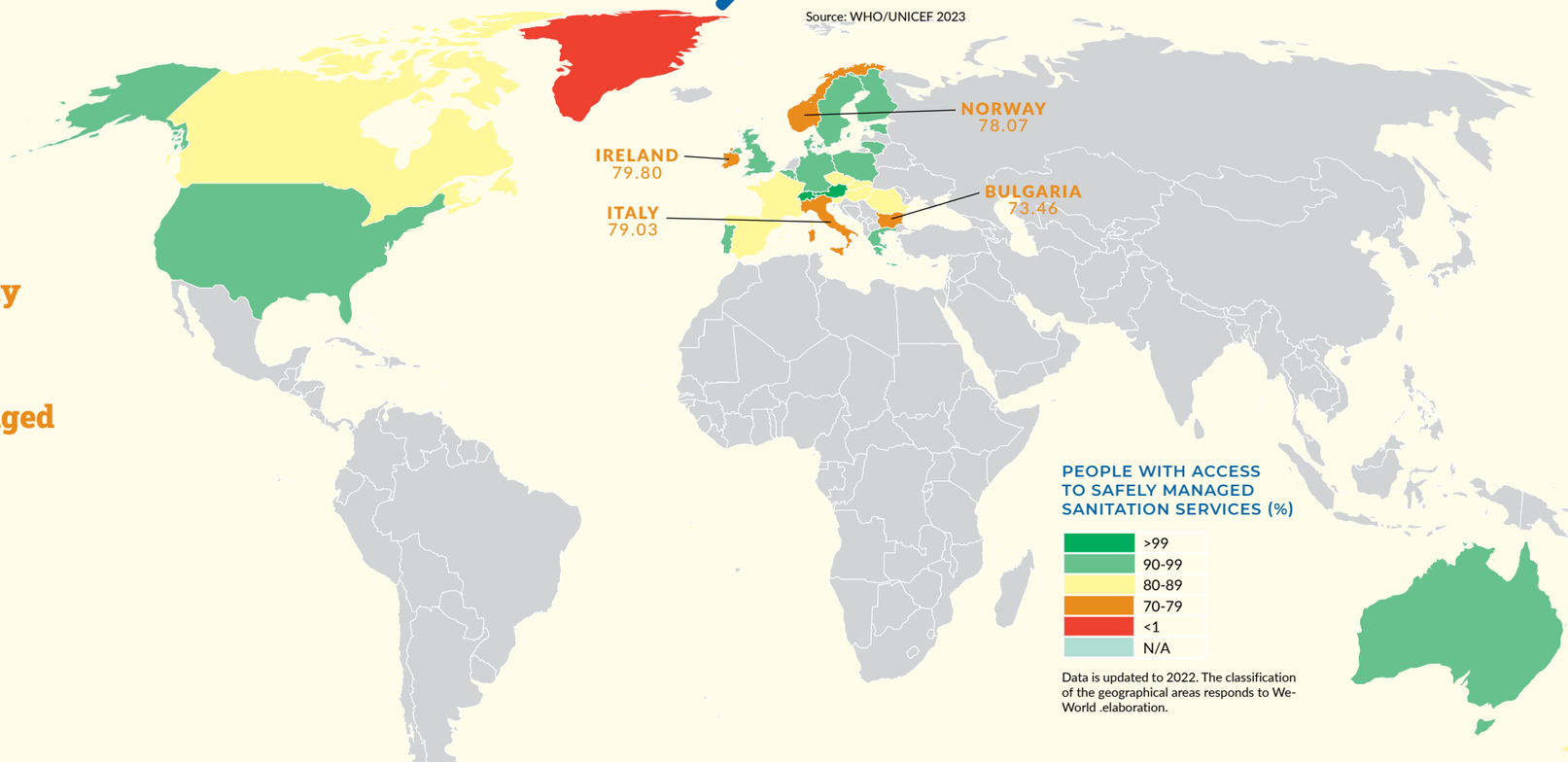
Data is updated to 2022. Source: WHO/UNICEF 2023.
The classification of the geographical areas responds to WeWorld elaboration.



In 2022, **in Italy 2 people out of 10** did not have access to **safely managed sanitation services**

PEOPLE WITH ACCESS TO SAFELY MANAGED SANITATION SERVICES (%)

Source: WHO/UNICEF 2023



PEOPLE WITH ACCESS TO SAFELY MANAGED SANITATION SERVICES (%)

- >99
- 90-99
- 80-89
- 70-79
- <1
- N/A

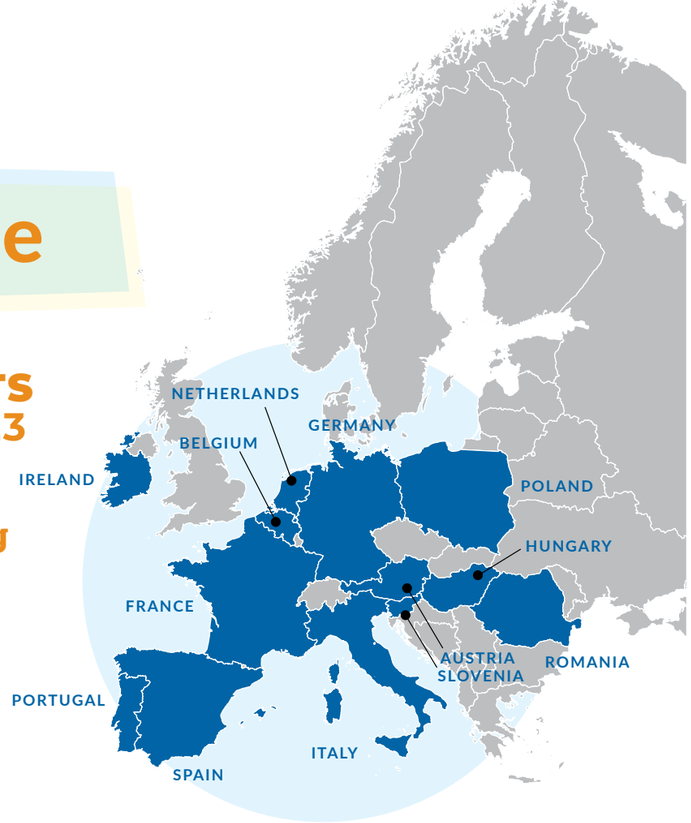
Data is updated to 2022. The classification of the geographical areas responds to WeWorld .elaboration.

WASH in Europe

OUR ACHIEVEMENTS BETWEEN 2020-2023

1 pan-European awareness-raising campaign on **climate change and water scarcity** carried out

59 million young Europeans reached



Innovative teaching methodology adopted to enhance students' critical thinking and sense of citizenship on **sustainability and current global issues**, including water resources management

45 high schools involved

1 capacity building training session on climate change and **social and evironmental activism** held

50 youth (18-35 years old) trained

FRAMING THE CONTEXT

WeWorld has operated in Europe since 2007, where it implements awareness-raising and global citizenship education activities and programs[1] to make citizens aware of global dynamics, giving them a primary role in the construction of fairer and more sustainable societies, and helping them exercise their rights and responsibilities towards others.

WeWorld's approach in Europe is aimed at promoting greater awareness of the causes and consequences of inequalities worldwide, with educational initiatives, debates and campaigns and with a constant dialogue with young people, especially on climate justice. Indeed, the mobilization of young people to fight for climate justice and to dialogue with institutions and civil society on climate and social justice is one of the distinctive elements of the interventions in the region.

Climate change is putting Europe's water resources under pressure. Even though most European countries have adequate water resources, water scarcity and droughts are increasingly frequent and widespread. In some regions, the severity and frequency of droughts can lead to a water scarcity situation, and overexploitation of available water resources can exacerbate the consequences of droughts (European Commission, 2021). About 30 % of Europe's population is affected by water stress during an average year and this situation is predicted to worsen due to the climate change-related increase in the frequency, magnitude, and impacts of droughts (Eea, 2021).

1 More info on WeWorld's activities and programs on Global Citizenship Education is available at https://www.weworld.it/en/what-we-do/settori-di-intervento/ecg and at https://www.weworld.it/en/what-we-do/publications/global-citizenship-education.

SECTORS OF INTERVENTION

WASH and BEHAVIOURAL CHANGE

WASH and CLIMATE

WASH and INCLUSION

European youth are trained and equipped with the right knowledge of the measures that help tackle climate change and its effects, such as water scarcity, while promoting more sustainable behaviours.

The causes of water scarcity worldwide are not only environmental[2], but also political, social and cultural: in the last fifty years we have more than doubled, and this has led to **unsustainable consumption and production patterns, causing the overuse of water**. Therefore, beside the adoption of policies for climate justice by governments and that of sustainable ways of production by companies, it is also essential to foster a collective behavioural change for the adoption of more sustainable lifestyles and to provide opportunities, especially for young citizens, to enhance their voice and agency by being involved in the decisions adopted for a sustainable collective future. **By acting as a global citizen, everyone must ensure that all communities are equipped with the right tools to mitigate and adapt to climate change and its impacts on natural resources.**[3] To do so:

→ **1 pan-European awareness raising campaign** (#WaterOfTheFuture)[4] has been launched to raise awareness among **59 million young Europeans** on climate change and water scarcity challenges. The campaign included **1 video spot on TV channels, the creation of 2 websites, 3 social media accounts and 4 YouTube channels**.

→ **Tips for avoiding more water shortages were disseminated to change water consumption patterns**, not just in individual uses, but also regarding the **hidden water footprint** of day-to-day activities (some tips, for instance, included using a durable bottle and refilling it during the day to reduce plastic bottles production; trying organic shampoos which have less impact on water systems; eating more vegetarian meals to reduce the amount of water needed to grow the grain which feeds animals).

→ **3 national awareness-raising "Street Actions"** (events, performances and screenings) **were carried out**[5]. These actions implemented through subgrants disbursed to youth groups and associations, **were aimed at promoting "everyday activism", fostering sustainable habits to tackle climate change and water scarcity by communicating the "invisible water footprint"**[6]. All the Street Actions were sustainably planned and promoted by using the Causal Learning methodology, which gave emphasis to people's capacity to learn through casual approaches.

→ **50 young people between 18 and 35 years old were trained on climate change related issued and experienced social and environmental activism,** while strengthening their capacity to effectively participate to local decision-making processes. The capacity building course "*Be a Change Maker*" addressed, among others, issues related to water resources from a two-fold perspective: by underlining the link between water and the exercise of other human rights and by analysing the **governance of water as a common good** and its dynamics.

→ **In 45 high schools, students refined their critical thinking and enhanced their sense of citizenship on sustainability and current global issues, including water resources management.** Through the teaching methodology of the debate, soft skills were developed, and reasoning was stimulated, as well as the ability to take decisions and that of problem solving[7].

2 Indeed, water privatization (which can be a solution to budget problems and old water systems) can cause rising prices, inadequate service provision, or become a subject of financial speculation. In addition, from an environmental point of view, pollution, especially illegal dumping, severely affects water quality.

3 Some of the data listed below refer to the project "*People and Planet. A common destiny*", funded by the European Union and implemented by a consortium of which WeWorld is one of the members. More info about the project is available at https://www.weworld.it/en/what-we-do/european-projects/people-and-planet-a-common-destiny.

4 For more info about the campaign, visit https://waterofthefuture.org/.

5 . Within the "Terra di Tutti Film Festival", a yearly festival which offers insights into human rights, gender equality, defence of fundamental freedoms, environmental and social issues and the WeWorld Festival, which annually organises talks, debates, artistic performances, exhibitions and movie projections about gender-related issues.

6 Hidden water is water not immediately felt or seen, but still required for almost every step in the production processes for many raw materials and finished products. The resulting water footprint of a product is calculated by adding up all the water required for each step of the production process.

7 Some of the issues addressed within "Exponi le tue IDEE!" Project were the creation of a supranational authority dealing with water management, to ensure access and legitimate use water in all nations, and the preferability of a public or private actor for water service management.

THE VOICE OF

Camilla Serlupi Crescenzi,
European Programme Officer for WeWorld

"When implementing our activities in Europe, we always take a programmatic, multi-perspective approach, which adds value to our interventions. This enables us to approach and examine a given issue in its totality and complexity because, based on the principles of social and environmental justice and equality, we handle the right to water and WASH-related concerns in a multidimensional way. We engage young people and provide them the chance to take the lead in exposing the linkages between global and local perspectives and levels, using the Sustainable Development Goals as a general framework. The goal is to include young people in the promotion and dissemination of new forms of production, consumption, and territorial administration, focusing on sustainability, environment, and human rights.

For example, through the Street Actions, we funded the project "IMPRONTE," which consisted of six artistic performances by the activist group Extinction Rebellion Bologna about the use and consumption of water in six different production value chains (cotton, agri-food, oil, mining, individual consumption, and water loss), to raise awareness about the importance of sustainable resource use and to stimulate reflection on the urgency of the water crisis. According to our vision, the problem was examined from a multidimensional perspective because it represented the effects of climate change and corporate activities on water resources as well as the consequences of these effects, such as forced migration and negative impacts on local communities."

WASH in Italy

FRAMING THE CONTEXT

Since 1999, WeWorld has been working in Italy, in support of children's and women's rights and in guaranteeing dignity and participation to all, including migrants and asylum-seekers.

Although Italy ranks 11th[1] in the world index category that measures countries' access to safe drinking water and sanitation (EPI, 2022), and the proportion of population using improved water supplies is high (93%), even if not complete (WHO/UNICEF, 2023), there are several challenges related to water supply and management, as well as considering the affordability of sanitary services and products.

Firstly, the amount of water dispersed into the network is considerable, quantifiable at 157 liters per inhabitant per day[2]. It is estimated that **the amount of water lost would meet the water needs of more than 43 million people for an entire year** (Istat, 2023).

Secondly, **almost 7 million people are not connected to the public sewage network**. The service is completely absent in 40 municipalities with 386,000 residents (0.7% of the population), located mainly in Sicily (25 municipalities) (ibid.).

Thirdly, in 2022, 9,7% of households have complained of irregularities in the water supply service. **Disservice affected almost 2.5 million**. Of these, about 70% lived in the South (1.7 million households), with Calabria and Sicily the most exposed to problems with water supply in homes (ibid.).

Lastly, **the public urban wastewater purification service is absent in 296 municipalities (3.7%), where 1.3 million inhabitants reside**. 67.9% of these municipalities (201) are in the South (mainly in Sicily, Calabria and Campania, involving 13.1%, 5.3% and 4.4% of the population respectively). In these municipalities, the existing plants are inactive because they are under seizure, undergoing modernization or construction (ibid.)

In response to this, the **European Commission has opened 4 infringement procedures**[3] against Italy about wastewater collection and purification. A situation worth 60 million Euros a year in fines for 75 non-purified agglomerations (GreenReport, 2022). In addition to the economic damage, there is also an environmental one: at the time of the fine, 6 million Italians were discharging their wastewater directly into the sea[4] (ibid.).

7 million people are **not connected** to the public **sewage** network

The public urban wastewater **purification service** is **absent in 296 municipalities** (3.7%), where 1,3 million inhabitants reside

The amount of **water dispersed into the network** is considerable, quantifiable at **157 liters per inhabitant per day**

1 Italy is tied with Greece. The other top ten are: Finland, Iceland, Netherlands, Norway, Switzerland, United Kingdom, Malta, Germany, Luxembourg and Sweden (EPI, 2022).

2 The highest values in 2020 are found in Sicily (52.5%) and Sardinia (51.3%), followed by the southern Apennine (48.7%) and central Apennine (47.3%).

3 1. Infringement 2004/2034 for 75 agglomerations of more than 15,000 population discharging into non-sensitive areas in Abruzzo, Campania, Calabria, Friuli Venezia Giulia, Lazio, Liguria, Apulia and Sicily; 2. Infringement 2009/2034 for 16 agglomerations above 10,000 population discharging into sensitive areas in Abruzzo, Friuli Venezia Giulia, Lazio, Lombardia, Marche, Piemonte, Puglia, Sardegna, Sicilia, Valle d'Aosta and Veneto; 3. Infringement 2014/2059 for agglomerations with a population greater than 2,000 population in Abruzzo, Basilicata, Calabria, Campania, Friuli Venezia Giulia, Lazio, Liguria, Lombardy, Marche, Puglia, Piedmont, Sardinia, Sicily, Tuscany, Umbria, Valle d'Aosta and Veneto; 4. Infringement 2017/2181 for 237 agglomerations with more than 2,000 population that do not have adequate urban wastewater collection and treatment systems in Abruzzo, Calabria, Campania, Friuli Venezia Giulia, Lazio, Liguria, Lombardy, Marche, Molise, Puglia, Sardinia, Sicily, Tuscany. More information at: https://commissariounicodepurazione.it/procedure-infrazioni/.

4 To address infringement procedures, since 2017, a Commissioner for water purification has been established, who is in charge of planning and managing all the necessary interventions.

THE ROAD TO MAKING WATER A COMMON GOOD

In Italy, the battle to make water a common good, and therefore ensures that its access can be a right for all, **culminated in 2007 with a popular initiative bill that collected more than 400,000 signatures**. This asked the **State for an integrated water service managed with participatory democracy tools**, counteracting the liberalization of essential public services.

Thus, **in 2011 an abrogative referendum was held on four questions, including the repeal of recent laws regarding the privatization of water services**. With a quorum of 54% and **94% of 'yes' votes, 27 million Italians voted for public management of the water service**.

Following the 2011 referendum, the law proposal n°2212[5] was deposited with the Chamber of Deputies, **demanding for the recognition of the right to water as a universal human right to be guaranteed to every citizen by safeguarding water resources as an inalienable public common good, for the protection of future generations, and managed outside the rules of the market.**

After thirteen years, even though the citizenship at the time voted against the privatization, the public character of a service that is basic to daily life and therefore to the well-being of the population, is still not guaranteed as it should be: referendum demands haven't been met yet. Indeed, **today there are so many joint-stock companies with both public and private shareholdings, which share a large part of the profits between shareholders**, the water service has multiple deficiencies, and **the bills go up, as shown by an estimated 90% increase between 2007 and 2017** (CGIA Mestre, 2018).

5 Available at: https://www.camera.it/leg17/995?sezione=documenti&tipoDoc=lavori_testo_pdl&idLegislatura=17&codice=17PDL0022541&back_to=.

Inequalities also persist in the provision and quality of sanitary facilities: **22% of the rural population and 21% of the urban population are not covered by safely managed sanitation** (WHO/UNICEF, 2023). This is also evident in public facilities, such as schools. 42% of schools building have traces of humidity and 33% of water infiltration, insufficiently provided bathrooms, with lack of toilet paper and soap, and/or hardly accessible to all: only 1 Italian school out of 3 is accessible to students with disabilities (Cittadinanzattiva, 2023).

In Italy, these issues affect mostly women, adolescents and children, having negative effects on their health, for example sexual, reproductive and menstrual health, on their education and growth, as well as limiting their social and economic participation to community life and the exercise of their rights.

22% of the **rural** population and
21% of the **urban** population
are **not covered by safely managed sanitation**

SECTORS OF INTERVENTION

THE LINK BETWEEN WASH AND SEXUAL AND REPRODUCTIVE HEALTH: THE ATLAS "WE CARE"

In April 2023, WeWorld published in Italian "*WE CARE. Atlas of Maternal, Sexual, Reproductive Child and Adolescent Health*"[6], and presented it at an event at the Italian Development Cooperation Agency (AICS). In September, an English version of the Atlas was published, which aims[7] to assess whether sexual and reproductive justice for women and girls is promoted and guaranteed in Italy and the world.

The report explores the main discriminations and denials of rights that women, children and adolescents still have to suffer today and is made up of 6 sections[8], including WASH and sexual and reproductive rights.

The data, analyses, best practices and interviews collected in the field, **show the ways in which access to WASH services impacts sexual and reproductive health**. Indeed, to ensure sexual and reproductive health and gender equality, women, girls and adolescents must have access to clean water, appropriate sanitation and adequate hygiene.

As the data collected in the report shows, Italy currently does not guarantee adequate sexual and reproductive rights. Critical issues are found in menstrual health, where the lack of comprehensive sexual education persists with unequal access to adequate menstrual products.

The Atlas, highlighting the link between WASH and sexual and reproductive rights, reveals how working on the first enables the raise of broader subjects such as gender equality and women's empowerment, and encompasses essential issues as gender-based violence, and help women and girls develop skills to overcome obstacles to their health, freedom, and development, as well as contributes to transformational processes that allow them to reach their full potential.

6 To read the Atlas, visit: https://www.weworld.it/en/what-we-do/publications/we-care.

7 The concept of sexual and reproductive justice goes beyond the narrower concept of sexual and reproductive health to include a whole range of other fundamental rights and freedoms. Therefore, guaranteeing sexual and reproductive justice does not only mean guaranteeing sexual and reproductive rights but also the right to life, privacy, education, information, and freedom from all forms of violence. In essence, it is a fundamental vehicle for promoting human rights and gender equality.

8 The 6 sections are: Natal health, Body policies, Gender-based violence, WASH and sexual and reproductive rights, Menstrual health and Sexual health and well-being.

TAMPON TAX: A MANIFESTATION OF THE LACK OF A SEXUAL AND REPRODUCTIVE JUSTICE AGENDA IN ITALY

Limited or inadequate access to menstrual products or menstrual health education due to financial constraints or socio-cultural stigmas associated with menstruation can lead to period poverty[9].

Combating period poverty means dealing with a wide range of factors that keep people with menstruation in poverty, including lack of access to water, affordable and quality products, inadequate spaces and facilities to manage menstruation, lack of information and stigma that still surround the topic.

In Europe, for example, **it is estimated that 1 in 10 women cannot afford menstrual products**[10] (Europarl, 2020). In Italy, although there are no official data on menstrual poverty, there is some information that frames the status of menstrual health: **until 2022, the so-called Tampon Tax was at 22%, equating basic needs such as sanitary towels to luxury goods**, like cigarettes and various beverages, while VAT was reduced to 10% for truffles, beer and wine.

Considering that the COVID-19 pandemic has greatly worsened the economic condition of women - it is estimated that **in 2020, of the 444,000 new unemployed, 70% were women** (Inail, 2021)- and that the lowering of Tax on such products could no longer be postponed, in the last months of 2020, **WeWorld**[11] .
The campaign was very well received: within a few weeks, thanks to a petition launched together with the OndeRosa association and several parliamentarians that supported WeWorld, **more than 600,000 signatures were collected**. Moreover, **WeWorld estimated the revenue needed to lower the Tampon Tax from 22% to 10% and 5%, which is much lower than the initial 300 million euros made by the Ministry of Economy**[12]. **The resulting estimate to reduce the rate from 22% to 10% required a coverage of about 47 million euros, while to reduce it to 5% of 67 million euros**[13].

During the discussion of the Budget Law 2021, thanks also to WeWorld's advocacy, the State General Accounting Office revised the revenue needed to lower the Tampon Tax to 10% to 90 million euros. Thus, **the Tampon Tax was reduced to 10% in the 2022 Budget Law, leading to a further reduction to 5% on all absorbent products (including baby products) in the 2023 Budget Law**[14].

However, in the Budget Law of 2024 the Tampon Tax has been raised once again to 10%. Therefore, **WeWorld relaunched**[15] **the campaign on social media, supporting the elimination of the Tampon Tax, considered a real form of economic violence that affects women and all people with a menstrual cycle.**

In any case, WeWorld continues to call that Italy follow the example of the leading European countries and **recognises that sexual and reproductive rights, including menstrual health, are human rights**. That is why it is necessary to ensure equal access to menstrual products, liminating the Tampon Tax.

Sexual and reproductive rights, including menstrual health, **are human rights**

9 Period poverty is a global issue affecting those who do not have access to the safe hygienic menstrual products they need, and/or who are unable to manage their periods with dignity, due to financial restrictions or socio-cultural stigma. In menstrual health, the term is often used to call attention to the confluence between appropriate and educated access to menstruation products and socioeconomic status, as well as to mobilise political and social activities around menstrual health.

10 Since 2007, 17 European countries, as Germany, France, Poland, Czech Republic, etc., have reduced the Tampon Tax, while, in February 2020, Scotland became the first country to approve a law making all menstrual hygiene products freely available. The law came into effect in August 2022.

11 #StopTheTamponTax.

12 Reply provided by the Ministry of the Economy on the quantification of the revenue needed to reduce the VAT rate for feminine hygiene products from 22% to 5%, to Question Time in the Finance Commission No 5-05080 Fragomeli: Financial effects of from the VAT reduction for feminine hygiene products.

13 Based on the quantification made by Nielsen, who estimated the market for menstrual products at €413,116,468, WeWorld has cautiously expanded the figure, considering products sold through channels not monitored by Nielsen: online market, neighborhood shops, local markets and green organic shops.

14 The European Union through the Council Directive (EU) 2022/542 of 5 April 2022 allowed member states to apply one reduced rate lower than 5% and one exemption ('zero rate') to a maximum of seven categories on the list of basic needs, e.g., foodstuffs, medicines, pharmaceutical products, etc. More information available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:32022L0542.

15 More information at: https://www.weworld.it/news-e-storie/news/fermiamo-la-tampon-tax-diciamo-no-alliva-al-10-sui-prodotti-mestruali.

THE EFFECTS OF CLIMATE CHANGE AFFECT THE RIGHTS OF NEW GENERATIONS

In Italy, since 2010, there have been 516 floods caused by heavy rainfall, 367 damage caused by tornadoes, 157 infrastructure damages caused by the intensity of the rainfall, 123 river floods (with damage), 55 damage caused by prolonged drought, 55 landslides caused by heavy rainfall and 17 heat waves (Legambiente, 2022). Furthermore, **in 2022, national water availability was almost 50% less than in the period 1991-2020** (Istat, 2022).

Extreme climatic events have serious consequences: between 1980 and 2021, they caused 22,000 deaths and 92 billion Euros of damage (Eea, 2023).

Although Italy is predisposed to hydrogeological instability, the poor maintenance of infrastructure, land and soil consumption, as well as the absence of climate change adaptation measures, contribute to making the territory even more fragile. This fragility has strongly appeared during the floods that hit northern Marche in September 2022 and Emilia-Romagna in May 2023[16].

In the latter case, according to the latest updates, **the flooding has caused 16 deaths and more than 23,000 displaced** (Agenzia per la sicurezza territoriale e la protezione civile, 2023). To support the flood-affected population, WeWorld organised a fundraising to support the humanitarian response. In addition, during the "Terra di Tutti Film Festival"[17], to raise awareness on the effects of climate change in Italy and, specifically, on what happened in Emilia-Romagna, an event was held, including a photographic exhibition of the flooding through the eyes of the photojournalist Michele Lapini and the screening of the documentary "Fango"[18], by Rita Marzio Maralla.

In view of the situation affecting Itay, in September 2023, WeWorld **published the Report "**Clima di cambiamento. Nuove generazioni, partecipazione civica e giustizia climatica" ("Climate of Change. New generations, civic participation and climate justice")[19], which focuses precisely on the impacts of climate change on new generations.

After examining the effects of climate change in Italy and reporting on WeWorld's good practice examples of climate and social justice and youth empowerment, **it reiterates the need to adopt multidimensional policies, tailored to the specific needs of the new generations, capable of guaranteeing a real promotion of their rights, especially their right to the future.** Indeed, many of them, do not feel that they are adequately considered in climate policymaking. Thus, there is a lack of formal and multilevel youth participation mechanisms that **enable them to take part in the decision-making process, so that they can participate directly in safeguarding/protecting their future**.

Extreme climatic events have serious consequences: between 1980 and 2021, they caused **22,000 deaths** and **92 billion Euros of damage**

16 In particular, in the recent case of Emilia-Romagna, given the enormous amount of water that rained (in just 36 hours, half the average annual amount of rain fell on the territory) and the geographical extension of the phenomenon, the floods were officially qualified as extreme climatic events (CNR, 2023).

17 Promoted by WeWorld and COSPE, Terra di Tutti Film Festival brings documentaries and social cinema from the Global south to Bologna, with the aim of giving visibility to the reality of those countries, peoples and social struggles that are 'invisible' in the mass media. The festival includes the participation of audiovisual works that focus on the struggle for equal rights, gender, the defence of freedom, active citizenship, environmental and ecological awareness.

18 A short film recounting the 'climate lockdown' days of the inhabitants of Pieve del Pino, in the Bolognese Apennines.

19 Report available at: https://www.weworld.it/cosa-facciamo/pubblicazioni/clima-di-cambiamento-nuove-generazioni-partecipazione-civica-e-giustizia-climatica.

Moving forward. Conclusions and Recommendations

In 2020, WeWorld adopted its first Global WASH Strategy for the period 2020-2023. The *Flowing Futures* Atlas was created to draw together the threads of four years of implementation of that strategy, to retrace the steps taken, capitalise on the lessons learned, and explore new perspectives.

The years of strategy implementation (2020-2023) and *the Flowing Futures* Atlas development have confirmed the utmost importance of the right to water and the WASH sector in all aspects of people's lives. **The WASH sector, like flowing water, pervades and influences nearly all of our interventions.**

Through the definition of the 7 thematic insights included in the *Flowing Futures* Atlas (WASH and Health, WASH and Inclusion, WASH and Community-resilience, WASH and Climate, WASH and Children's Rights, WASH and Gender Equality, WASH and Behavioural Change), we wanted to highlight this transversality by referring our multi-sectoral and interdisciplinary approach to the broader framework of the 2030 Agenda.

The *Flowing Futures* Atlas demonstrates that, while water is essential to all aspects of existence and the enjoyment of all human rights, it is still a resource denied to far too many people. While waiting to equip itself with a future Global WASH strategy, WeWorld will use the lessons learned and collected in this Atlas to increasingly improve its interventions in the field and achieve the goal of WASH for All. In the next pages are some intervention recommendations that the organisation will adopt while waiting to systematise its future strategy. These recommendations, although designed for WeWorld and for our areas of intervention, can resonate with all the actors who deal with WASH in various capacities. **Only by working together and in a synergistic manner will we be able to guarantee access to safe, clean, and drinking water for everyone.**

WEWORLD'S MULTISECTORAL AND INTERDISCIPLINARY APPROACH TO WASH AS DEFINED BY THE *FLOWING FUTURES* ATLAS

RECOMMENDATIONS' SUMMARY

WASH and HEALTH	• Invest in health and hygiene awareness for behavioural change • Adopt a joint and comprehensive approach (infrastructures + capacity-building) • Focus on displacement • Invest in preparedness • Assess needs with a long-term perspective
WASH and INCLUSION	• Prioritise people with disabilities • Prioritise elderly people • Remove barriers • Create tailored WASH kits • Raise awareness on specific needs among WASH actors • Build inequality-sensitive distribution systems • See access to water as an income-generating source • Integrate Cash and Voucher Assistance (CVA) modality in WASH
WASH and COMMUNITY-RESILIENCE	• Localize • Build capacity on governance in water resources management • Plan long-term • Focus on Non-Revenue Water (NRW) • Capitalize good practices • Research, develop and innovate for sustainable impact
WASH and CLIMATE	• Envisage environmental education on multiple levels • Clearly define risks in the context analysis • Target questions and responses • Promote governance for climate resilience • Integrate environmental and resource protection • Address waste management • Integrate WASH in health actions with environmental protection • Intervene from a Water, Energy, Food, and Ecosystems (WEFE) perspective
WASH and CHILDREN'S RIGHTS	• See children as agents of change in their communities • Promote child-tailored awareness-raising • Employ child-focused needs assessment • Train WASH workers on child-protection • Create child-friendly WASH facilities • Focus on unaccompanied minors • Advocate for the institutional adoption of our educational tools • Counter child labour in WASH-related tasks • Increasingly integrate WASH and child-protection interventions
WASH and GENDER EQUALITY	• Adopt a gender-integrated approach • Employ gender-sensitive needs assessment • Use a participatory approach throughout the response cycle • Promote the active participation of women in existing governance systems • Design gender-sensitive WASH infrastructures and facilities • Link short-and long-term interventions and goals • Keep in mind environmental sustainability in menstrual hygiene management (MHM) • Balance gender relations within communities • Work with men to advance the goals of women
WASH and BEHAVIOURAL CHANGE	• Systematically integrate the awareness component into all interventions • Identify "multipliers" in the community • Adapt to the local culture • Adapt to the target • Use child-friendly communication • Strengthen MEAL systems related to behavioural change

WASH and HEALTH

RECOMMENDATIONS

→ **INVEST IN HEALTH AND HYGIENE AWARENESS FOR BEHAVIOURAL CHANGE:** one of the central objectives of WASH interventions is reducing death rates from water-related diseases, as also established by target 3.3 (SDG 3: Good Health and Well-being). For this reason, it is essential to integrate health messages and good practices into hygiene awareness campaigns with a behavioural change perspective. For example, on Handwashing Day, we could stress how correctly washing your hands helps reduce infections. It is fundamental that the people we work with are aware of the chain of contamination and how correct hygiene practices act as a barrier to diseases. These activities must be adapted for different targets; with children, for example, child-friendly approaches and games should be used[1]. Topics to be addressed in awareness activities should be defined only after a participatory need assessment has been developed as part of an effective community engagement, which should focus on maximising community influence on and acceptance of WASH in a continuous process[2].

→ **ADOPT A JOINT AND COMPREHENSIVE APPROACH:** in countries where we intervene in the health sector from an infrastructure standpoint, it is also necessary to adopt a WASH in Health approach and, as a result, activate capacity-building processes not only for the operation and maintenance of WASH systems but also for the promotion of correct hygiene practices, which also favour infection prevention control (IPC).

→ **FOCUS ON DISPLACEMENT:** in situations of displacement or forced migration, it is necessary to pay attention to the most vulnerable segments of the population and individuals (such as women, elderly people, children, minorities, people with disabilities, etc.) and assess whether they have peculiar difficulties accessing WASH, if compared to other population groups. Difficulties in accessing WASH are almost always accompanied by difficulties in accessing healthcare. That is why it is crucial to proceed with a sound stakeholder mapping process to examine access to healthcare and possible barriers to overcome.

→ **INVEST IN PREPAREDNESS:** poly-crises, such as wars, natural catastrophes, and resource conflicts, are becoming more common in the areas where we operate. These crises frequently result in the outbreak of diseases, if not epidemics. For this reason, throughout the project design phase, we must consider the long-term and plan for healthcare readiness efforts. Communities must be prepared to respond resiliently to emergencies by having a response strategy and the required resources, such as water treatment or hygiene kits. When financial resources allow it, a budget allocation should be set aside to distribute required supplies for preparedness in local healthcare facilities or in collaboration with disaster risk reduction committees.

→ **ASSESS NEEDS WITH A LONG-TERM PERSPECTIVE:** based on an experience implemented in Palestine from 2021 until October 2023 in the WASH in Health sector, we could scale up and adapt to other contexts a programmatic process that was piloted in the area, entailing all the steps from the need assessment to the implementation phase in several healthcare facilities. The first step is a WASH assessment for health institutions, whose primary objective is to verify the conditions of healthcare facilities considering drinking water, domestic water, water for immunocompromised patients, distilled water, wastewater, solid waste sanitation and hygiene practices among health workers. Based on these results, a specific technical assessment of particular emergency topics could follow[3]. The assessment could be conducted in a participatory manner, for example, by running Water and Sanitation for Health Facility Improvement Tools (WASH FIT) in all facilities scheduled to be assessed in coordination with local stakeholders (such as the Ministry of Health, water service providers and water authorities). Healthcare facilities' staff is also involved in identifying the situation, problems and needs, as well as planning solutions. Finally, in the planning phase, we should prioritise structural interventions (repair of water and wastewater systems, for example) as well as operational interventions (staff training on IPC control, delivery of preparedness materials in the event of an epidemic, creation of standard operating procedures - SoPs, and so on).

1 In past projects, we have often used glitter on hands to show children how germs spread and remain attached to the body, objects, and surfaces if hands are not carefully washed.

2 Five main steps should be followed: assess and prioritise risks to public health; find out more about behaviours and practices about the priority risks, determine the barriers as well as enablers and motivators, design and implement appropriate and specific activities, monitor progress also adjusting if needed.

3 For example, in Palestine, we did a second technical assessment specifically on wastewater treatment, medical waste collection and treatment, and Infection Prevention and Control – IPC.

WASH and INCLUSION

RECOMMENDATIONS

→ **PRIORITISE PEOPLE WITH DISABILITIES:** when intervening both at the community and household level, a priority in choosing our target should be given to families that count one or more members with disabilities, starting from an inclusive need assessment, because caring for people with disabilities deeply influences families in terms of necessary resources (including WASH resources).

→ **PRIORITISE ELDERLY PEOPLE:** when intervening both at the community and household level, another group that should be prioritised are elderly people. These individuals do have peculiar needs, making them particularly vulnerable and fragile to external disruption factors (like conflicts, displacements, natural disasters, etc.) compared to other people: for example, they tend to be more exposed to illnesses and encounter more challenges in accessing resources. This is why they should play an active role in the project cycle, starting with their involvement in needs assessment and intervention design.

→ **REMOVE BARRIERS:** when working on infrastructure interventions (for example, schools or medical centres), we must constantly ensure inclusion and accessibility not only to WASH facilities but also to the infrastructure itself, with a focus on the unique requirements of people with disabilities and elderly people. Indeed, the ultimate goal of disability inclusion is to eliminate all barriers, whether physical, environmental, attitudinal, or institutional. Infrastructure upgrades like ramps and bathroom assistance devices address physical barriers. Other barriers can be addressed through community awareness raising and engagement, lobbying and training, and the implementation of projects that directly and actively involve individuals with disabilities (for example, vocational training).

→ **CREATE TAILORED WASH KITS:** when distributing kits or designing response strategies, it is vital to address all people's needs intersectionally. As done with menstrual hygiene management (MHM) kits, communities and people with specific needs (such as elderly people and people with disabilities) must be consulted to determine what items they require (e.g., incontinence pads, bedpan for people with disabilities or protective bed cloth, etc.).

→ **RAISE AWARENESS ON SPECIFIC NEEDS AMONG WASH ACTORS:** to guarantee that the WASH for All goal is properly met, all actors participating in the governance of WASH resources must be equally involved and aware of the special needs of the most vulnerable. Our aim is also to raise awareness among WASH actors (particularly at the institutional level) about the need to reach out to families who face greater challenges than others. For example, if a household has a member with a severe impairment, they should be urged to locate water points closer, if not directly inhouse.

→ **BUILD INEQUALITY-SENSITIVE DISTRIBUTION SYSTEMS:** when working on water distribution networks, it is important to consider extreme inequities and vulnerabilities, such as disability. Prepaid tokens (already tested in a pilot in Kenya), community-level tariff subsidies, bill discounts, and so on, are examples of potential approaches. To guarantee that access to water is inclusive, processes could be implemented at the community level to assist the most vulnerable individuals. Naturally, any system must address the needs and practices of its community. Tokens, for example, function well in cities but may need to be more effective in rural communities, where considerable awareness is required to ensure instrument buy-in.

→ **SEE ACCESS TO WATER AS AN INCOME-GENERATING SOURCE:** to foster long-term community autonomy. When intervening in environments where access to water is insufficient and minimal standards are not guaranteed, we must consider the community's overall poverty level and think about sustainability and resilience. In this regard, consideration must be given not just to access to water for drinking or hygienic purposes, but also to agricultural needs and productive needs in general, to power income-generating activities. An example could be the adoption of innovative and water-efficient activities, such as irrigation with non-conventional water (NCW).

→ **INTEGRATE CASH AND VOUCHER ASSISTANCE (CVA) MODALITY IN WASH:** in addition to inviting country offices to consult the organisation's CASH Global expert for specific requests linked to contexts and individual interventions, the WASH Community of Practice will organise regular meetings to disseminate knowledge and good practices of integration of the CVA in the WASH sector in order to increasingly enhance CASH for WASH activities, when feasible and relevant.

WASH and COMMUNITY RESILIENCE

RECOMMENDATIONS

→ **LOCALIZE:** this notion is already the foundation of our actions and Nexus interventions, and it must also be applied to WASH. To ensure ownership and sustainability, the goal should be to strengthen local capabilities and collaborate on development plans with local authorities (as has already been done in many countries where we operate): strengthening this component is of utmost importance to guarantee local ownership and sustainability.

→ **BUILD CAPACITY ON GOVERNANCE IN WATER RESOURCES MANAGEMENT:** knowing and mapping all the actors involved is critical to ensuring that water resources are properly managed at all levels, from the distribution network to the operation and maintenance service to the end user's responsibility. Therefore, we must pay attention to and activate the various actors participating in the water cycle, employing diverse capacity-building procedures that are tailored to the function that each actor plays in the water cycle, as well as resource and facility management. When considering the aspect of water scarcity, it is also important to work with local stakeholders in the definition of local policies and regulations for the use of non-conventional water (NCW), especially in the agriculture sector.

→ **PLAN LONG-TERM:** when intervening in community governance, we must consider the long-term implications. This is done not only to ensure the interventions' long-term viability but also for prevention and preparedness purposes. As a result, the community must be prepared to respond to the onset of a crisis in terms of disaster risk reduction (DRR), as well as recognising and resolving resource conflicts. All of this is possible if contingency plans and exit strategies are developed from the start of the intervention.

→ **FOCUS ON NON-REVENUE WATER (NRW):** non-revenue water[4] represents a major challenge for the sustainable management of water resources in many contexts in which we intervene and one that can only be addressed through a governance approach (as it is predominantly caused by system inefficiencies). An NRW-sensitive approach should extend beyond centralised water distribution systems (such as aqueducts) to more conventional systems. This is because the ultimate goal is to make the system more efficient, regardless of the type of system, so that the water withdrawn reaches the end consumer. As a result, conducting a NRW assessment in the context of the intervention is essential. The issue must be linked to a climate resilience strategy for water resource management, as well as behavioural change practices and improvement of local technical capacity.

→ **CAPITALIZE GOOD PRACTICES:** to ensure that community-resilience, and hence sustainability, is effectively implemented in the reference context, rather than just in the individual community of intervention, it is also vital to capitalise on and spread best practices. Training in sound resource management techniques or creative non-traditional water management activities, for example, might be made available to other communities in addition to those with which we work directly, with exchange visits and the possibility to interact with other experiences both at a country and regional level.

→ **RESEARCH, DEVELOP AND INNOVATE FOR SUSTAINABLE IMPACT:** to increase the potential of our interventions, we must broaden our network. Universities, research centres and organisations specialised in creating behavioural change activities and practices could play a significant role in supporting technical implementation and capacity building, introducing innovation, identifying resource management tools and encouraging behavioural change mechanisms and social support practices for the most vulnerable groups.

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4 Non-revenue water (NRW) refers to water that is produced but then lost or unaccounted for. This means that NRW is the difference between the amount of water generated by a water utility or service provider for consumption or use and the amount of water paid to consumers, which places a financial and environmental burden on water utilities. Non-revenue water loss can be divided into two categories: real losses and apparent losses. Leaks, bursts and other physical difficulties inside the distribution network create actual losses, although metre mistakes, unauthorised usage and data handling errors frequently cause perceived losses. The cumulative impact of these losses not only strains the finances of water utilities, but also exacerbates the difficulties of water scarcity and environmental sustainability.

WASH and CLIMATE

RECOMMENDATIONS

→ **ENVISAGE ENVIRONMENTAL EDUCATION ON MULTIPLE LEVELS:** we must integrate environmental education modules and activities into each of our projects, particularly those with a substantial WASH component, from the beginning. These activities should be tailored to a variety of audiences, beginning with children, who, in addition to learning climate threats on water resources, and appropriate resource management techniques can become knowledge multipliers and change agents in a child-to-child and child-to-parent approach. Awareness of climate and natural resource protection must then be combined with all other types of interventions within the community, including those involving the operation and maintenance of WASH facilities and water resources protection. Finally, environmental education modules should be "extended" to all governance actors to build policies sensitive to the climate crisis and environmental protection.

→ **CLEARLY DEFINE RISKS IN THE CONTEXT ANALYSIS:** climate change has an impact on the environment, resources, people, and infrastructure, particularly on WASH systems. As a result, when examining an intervention context and defining necessities with the community, we should incorporate an assessment of potential climate impacts on several fronts. In this sense, we should evaluate the area's and community's risk exposure; the potential effects on natural resources; the intersectionality of the impact (i.e., whether some segments of the population are more vulnerable than others); and the community's potential response capacity (both at the household and system levels).

→ **TARGET QUESTIONS AND RESPONSES:** climate change is a global phenomenon, although its effects on different groups of people can vary greatly. In this sense, we will increasingly need to adopt an intersectional lens to recognise how people from one or more marginalised groups (based on gender, ethnicity, age, disability, and so on) are impacted differently by the effects of climate change. This perspective must be considered throughout the project, from needs assessment to implementation, as well as in terms of preparedness and disaster risk reduction. Contingency plans should be developed with a diverse range of experiences and backgrounds in mind, rather than a single recipient model.

→ **PROMOTE GOVERNANCE FOR CLIMATE RESILIENCE:** several of our programmes have long emphasised the WASH governance component as a crucial instrument for ensuring the intervention's sustainability and community ownership. The element of local governance of water resource management should, therefore, become an integral part of all our WASH interventions, enriching itself with tools for controlling resource overexploitation or expedients to maximise resource use (such as, for example, the use of non-conventional water or addressing the non-revenue water) to improve climate resilience and environmental protection.

→ **INTEGRATE ENVIRONMENTAL AND RESOURCE PROTECTION:** all our WASH interventions should incorporate resource protection-related actions (both training and direct intervention). For example, in Burundi, we work with a holistic approach, considering the water basin with stress on spring protection and also sustainable agriculture to avoid contamination of water resources; in Nicaragua, we work on rainwater harvesting to promote water saving; and in Palestine, we promote the use of NCW through smart irrigation and low-impact agriculture techniques.

→ **ADDRESS WASTE MANAGEMENT:** waste management should be addressed systematically in our WASH programmes, especially since poor management can endanger water supplies and, ultimately, the environment and communities. Accurate waste management can be carried out on two levels: at the institutional level, working with local stakeholders to map risks and plan solutions; and at the local level, involving local communities in awareness-raising activities and the adoption of good practices, such as the 3R approach (Reuse, Recycle, Reduce).

→ **INTEGRATE WASH IN HEALTH ACTIONS WITH ENVIRONMENTAL PROTECTION:** within each of our WASH in Health projects, we should pay increased attention to how healthcare facilities manage infectious medical waste and sharp waste. From an environmental standpoint, this also implies that, in terms of infrastructure, we must choose waste treatment alternatives with little environmental impact (such as autoclave, microwave combined with shredder and solar energy sources). However, the same argument must be extended to sanitation facilities, not only at the healthcare facility level but also at the home level: when interfering in sanitation initiatives, it would be a good idea to tilt, for example, towards EcoSan toilets[5] or provide wastewater treatments, to avoid pollution of environment and water resources.

5 The EcoSan toilet is a closed system that does not need water, so is an alternative to leach pit toilets in places where water is scarce or where the water table is high and the risk of groundwater contamination is increased. The toilet is based on the principle of recovery and recycling of nutrients from excreta to create a valuable resource for agriculture. For more information see https://washmatters.wateraid.org/blog/ecosan-toilets-an-alternative-to-conventional-sanitation-in-vulnerable-locations.

→ **INTERVENE FROM A WATER, ENERGY, FOOD, AND ECOSYSTEMS (WEFE) PERSPECTIVE:** the WEFE Nexus[6] denotes a close relationship between water resources, food security, energy supply systems, and habitat impacts. All these components should be examined together in our WASH efforts, as they allow us to take a more systematic and holistic approach. For example, the energy factor might be easily incorporated into infrastructural WASH interventions, such as solarizing pumping stations or using solar irrigation systems in agriculture. Water shortage must always represent a compass in initiatives focusing on subsistence, food security, and agricultural development. For this reason, where the context allows, we should consider rainwater harvesting or low-consumption irrigation systems, as well as agroecological practices that adapt to climate change (such as climate-resilient seeds and crops) or nature-based solutions with a low environmental footprint. Agricultural development also includes wastewater treatment and the use of non-conventional water sources (rainwater collection, wastewater reuse, and desalination technologies).

6 For more information see https://uploads.water-energy-food.org/resources/wio9781789062595.pdf.

WASH and CHILDREN'S RIGHTS

RECOMMENDATIONS

→ **SEE CHILDREN AS AGENTS OF CHANGE IN THEIR COMMUNITIES:** children are actors of change and multipliers of fundamental good practices (child-to-child and child-to-parent transmission of knowledge). For this reason, in our WASH projects, we must recognise their central role, involve them and structure activities that allow them to exercise this soft power. For example, proposing focus group activities led by children and aimed at sharing good hygiene practices has already proven to benefit the entire community.

→ **PROMOTE CHILD-TAILORED AWARENESS-RAISING:** precisely because children play the role of agents of change in their communities, it is essential to ensure that learning is tailored to children age and communication capacity. Learning through play[7] has been proven particularly effective for children. For this reason, we must continue to employ playful methodologies and engage children and caregivers in creative and interactive activities (such as drama, broadcasts, and games). However, awareness activities must be carried out ensuring a safe and protected environment, integrating key child-protection messaging with those on WASH.

→ **EMPLOY CHILD-FOCUSED NEEDS ASSESSMENT:** this phase must also consider the development and learning stages of the child. An effective needs assessment should be conducted in a safe and protected environment. Children and their parents and/or caregivers should be consulted when the needs assessment location is determined. The focus group methodology is a preferred method for collecting data from children with special needs. Over the years, WeWorld has developed various tools for thematic need assessments or for targeting specific groups, such as the girls-tailored focus group template (which is available in the Appendix of the MHM modality).

7 For more information see https://www.gse.harvard.edu/ideas/usable-knowledge/23/05/embracing-learning-through-play.

→ **TRAIN WASH WORKERS ON CHILD-PROTECTION:** so that all our staff, and in particular WASH staff, have a solid knowledge of child-friendly communications, principles, and approaches. WASH workers, as frontline workers, have higher chances to meet children and should be trained on basic child protection concepts, such as the risks children might face around WASH facilities, psychological first aid, child-friendly communication skills, and child protection referral mechanisms. Regarding this last point, it is important to refer to the organisation's PSEA Policy (Protection from Sexual Exploitation and Abuse).

→ **CREATE CHILD-FRIENDLY WASH FACILITIES:** all facilities must be child-friendly, starting from the height of handwashing points to bathrooms (that should have a toilet with a seat instead of a simple pit, which could make children feel less safe). However, it is also significant to consider the environment where the WASH facility is placed: to ensure safety it must be non-isolated, well-lit, close to home, school, or places familiar to children.

→ **FOCUS ON UNACCOMPANIED MINORS:** particularly in emergency and displacement contexts due to wars, conflicts, or environmental catastrophes, children face a higher risk to lose contacts with their parents or caregivers. Unaccompanied and separated children are exposed to multifaceted risks of abduction, trafficking, sale, exploitation and illegal adoption,

physical violence and harmful practices including child marriage, sexual violence, detention, child labour, recruitment by armed forces and armed groups, and sexual exploitation and abuse. For this reason, it is necessary to promptly identify this target and provide tailored responses.

→ **ADVOCATE FOR THE INSTITUTIONAL ADOPTION OF OUR EDUCATIONAL TOOLS:** this is necessary to ensure that interventions are sustainable and that the right to inclusive and quality education extends beyond the perimeters of the individual project or intervention. When institutional stakeholders adopt our tools (as done in Brazil with contextualised education), it is possible to achieve a greater and possibly more lasting impact. To become WASH-related, these curricula should consider elements such as education on correct personal hygiene, management of menstrual hygiene and menstrual health in general, and environmental protection linked to responsible use of resources.

→ **COUNTER CHILD LABOR IN WASH-RELATED TASKS:** children often have the responsibility of collecting water for the entire family. To reduce the risks associated with this activity and child labour-related risks, we must always involve children in decisions about what activities to perform and how. When doing so, it is paramount to verify that only children over the minimum working age (also according to national law) are involved in decent WASH-related work (including cash-for-work programs). On this point, also in the CVA interventions, we have included standards for the selection of recipients of cash for work activities, in which we have specified that they must be over 16 years old and be the only breadwinner to avoid it becoming exploitation.

→ **INCREASINGLY INTEGRATE WASH AND CHILD-PROTECTION INTERVENTIONS:** in addition to inviting country offices to consult the Child-Protection Global Expert for specific requests linked to contexts and individual interventions, the WASH Community of Practice will organise regular meetings to disseminate knowledge and good practices for integrating Child-Protection into the WASH sector.

WASH and GENDER EQUALITY

RECOMMENDATIONS

→ **ADOPT A GENDER-SPECIFIC APPROACH:** WASH is a critical pathway to transforming gender relations and supporting women and girls as agents of change to lead healthy lives and participate in social, economic, and political activity. The effects of lack of clean water and decent sanitation facilities are felt most by women and girls. Investing in WASH is critical to fulfilling basic human needs and realising the health and rights of women and girls. Women and girls have different and peculiar needs compared to men: this is why, to be able to meet those specific needs, it is essential to adopt gender-disaggregated approaches. Gender disaggregation also applies to the response phase, and we should all be aware of that: indeed, whenever a response is associated with or directed at a particular target group, it will have different impacts on men and women. Needs and responses to those needs must then be addressed separately. The use of generic terms like "urban households" and "displaced population" can obscure the needs of women and other marginalised groups. "People" and "population" should always read "women and men" as a reminder that distinct information is required. Efforts should also be made to reveal the differences within these groups (social class, age, ethnicity, etc.) by adopting an intersectional lens, as gender is a variable that has different relevance for different groups.

→ **EMPLOY GENDER-SENSITIVE NEEDS ASSESSMENT:** in this fundamental phase, women and men should be interviewed separately. Furthermore, to ensure a greater sense of security and inclusion, women should be interviewed by women and consult with representative samples of different groups in the community (not just community leaders). Women must be present in every intervention phase, from need assessment to response design. When such a participatory approach is not guaranteed, there will always be the risk of not responding to women's needs and exposing them to social and economic vulnerabilities. These processes must be built based on the targeted sample recurring to different participatory methods.

→ **USE A PARTICIPATORY APPROACH THROUGHOUT THE RESPONSE CYCLE:** from initial response through long-term programming, communities' participation in needs identification, project design, implementation, and monitoring is paramount. Participatory approaches are often more successful at recognising and dealing with differences among the population concerned, creating sustainable benefits for various groups. Inadequate involvement and support for women and other disadvantaged groups has tended to worsen their relative economic situation and social status. This is why ensuring women (and other vulnerable groups) are always consulted and actively involved in governance processes is essential.

→ **PROMOTE THE ACTIVE PARTICIPATION OF WOMEN IN EXISTING GOVERNANCE SYSTEMS:** many WASH interventions implemented over the years have integrated the fundamental component of governance. However, it is necessary to increase efforts to ensure that this governance is adequately representative of the population, promoting women's active and effective participation. This applies both to water committees in rural areas and to more structured service providers or utilities in urban areas. Female participation does not only take the form of decision-making but also in providing their technical professionalism; women can intervene thanks to their knowledge (in the Middle East, many women engineers have participated) or to operation and maintenance activities (as happened in Mozambique with female technician of handpumps).

→ **DESIGN GENDER-SENSITIVE WASH INFRASTRUCTURES AND FACILITIES:** very often, women incur risks to their safety when WASH structures and facilities are not adequate to meet their needs, which discourages their use, leading to a series of consequences. For this reason, all WASH facilities and infrastructure must be designed from a gender perspective regarding accessibility and safety. For example, in the case of common public facilities such as toilets, these should have a door that closes properly, be well-lit, have a bin for disposing of menstrual product waste, and be placed in accessible locations. The same applies, for example, to a well or a structure for supplying water, which should always be located not too far from homes and in a place where the woman does not risk suffering violence. Women should decide on the design and location of the facilities because they are the first and responsible ones to use them (also from a sustainability perspective). At the same time, it is crucial to work on awareness campaigns not only to guarantee the facilities' buy-in but also to establish community and social protection mechanisms. For example, women could feel safer by organising shifts during the day to go together to collect water.

→ **LINK SHORT-AND LONG-TERM INTERVENTIONS AND GOALS:** emergency relief and poverty reduction programmes must also influence the levels of society that determine social structures and contribute to perpetuating inequality. All interventions must consider the long-term impact on overall access to resources and benefits by the most discriminated groups, including women. In emergency contexts caused by conflicts or environmental catastrophes, it often happens that women's access to resources is jeopardised. Therefore, it is necessary to build a tailored response that looks at guaranteeing their rights not only in emergencies but also in the long term, considering the specific needs of lactating women, pregnant women, elderly women, and women with disabilities.

→ **KEEP IN MIND ENVIRONMENTAL SUSTAINABILITY IN MENSTRUAL HYGIENE MANAGEMENT (MHM):** access to water is increasingly threatened in emergency contexts by its scarcity, which is further aggravated by climate change and overexploitation. Furthermore, we need to consider the issue of waste management: inadequate disposal can lead to environmental pollution, including contamination of water resource. In this context, waste menstrual products play a significant role. The choice of a menstrual product must be the right of the people, who must be able to select the product that best suits their needs. However, after an accurate needs assessment and after having ensured the acceptance of these items by the end users, we should try to increasingly integrate innovative menstrual products such as menstrual cups or menstrual underwear into our kits.

→ **BALANCE GENDER RELATIONS WITHIN COMMUNITIES:** in many contexts where we intervene, the logic of the *male breadwinner* and the *female carer* does not apply. Especially if we consider the poorest areas and population groups, women are playing both roles. This exposes them to significant risks and vulnerabilities, especially when crises arise due to conflicts, displacement, or natural disasters. For this reason, it is necessary to rebalance gender roles and gender relations within the community through widespread awareness-raising work. To ensure that this operation is successful, it is paramount to immediately identify and rely on organised groups (formal or informal) of women who play the role of community leaders, perhaps because they are older or well-educated or because they are dealing with relevant topics (such as feminist groups, associations or organisations). They can act as multipliers of good practices, and their support and involvement become fundamental from the perspective of the sustainability of the intervention, especially those of behavioural change, which must touch the deepest chords of the communities.

→ **WORK WITH MEN TO ADVANCE THE GOALS OF WOMEN:** We should continue to sensitise and actively engage men (WeWorld's staff as well as the people we work with) in supporting greater involvement and decision-making opportunities for women to understand the benefits of a gender equality approach and balanced human development.

WASH and BEHAVIOURAL CHANGE

RECOMMENDATIONS

→ **SYSTEMATICALLY INTEGRATE THE AWARENESS COMPONENT INTO ALL INTERVENTIONS**: to ensure effective sustainability. The topics we should address are good hygiene practices (including their influence on nutrition), safe water storage and handling, prevention of water-borne diseases, infection and prevention control, especially in healthcare facilities, environmental education, from protection of natural resources to waste management, safe sanitation, the importance of operation, maintenance and payment of the service, etc. The transversality of these themes makes it clear how awareness is linked to any project, from those linked to the distribution of emergency kits to infrastructure projects to those linked to WASH governance.

→ **IDENTIFY "MULTIPLIERS" IN THE COMMUNITY:** to ensure that the message we want to convey is accepted by the community, even before it is disseminated, it is necessary to identify spokesperson figures (including community leaders) and consult with them on the best methods to raise awareness among the population.

→ **ADAPT TO THE LOCAL CULTURE:** this is essential to ensure that the community understands the message we want to convey. Therefore, all our materials should not only always be translated into local languages but also be inclusive of the specific needs of certain groups of individuals (for example, people with disabilities or illiterates) and sensitive to the local culture. Some examples of activities already implemented are the menstrual diary translated into the indigenous Miskito language in Nicaragua; the snakes and ladders game translated into Swahili; and the handwashing awareness song in sign language created in Mozambique.

→ **ADAPT TO THE TARGET:** to be effective, campaigns must respond to the specificities of the different targets we work with. For example, when it is necessary to intervene with a small group on a sensitive issue, it is better to resort to the focus group methodology, which guarantees greater intimacy and a sense of security. In emergency response, for example in the outbreak of an epidemic, you can opt for mass actions such as SMS campaigns. Therefore, each intervention must be calibrated to the reference target, including local authorities who may be intercepted on international days (such as World Water Day, Global Handwashing Day, etc.).

→ **USE CHILD-FRIENDLY COMMUNICATION:** as experienced in several of our interventions, children are agents of change and multipliers of good practices fundamental for the well-being of their communities. For this reason, they must be priority targets in awareness interventions. The materials targeting them must resort to child-friendly communication, therefore, employing a simple and direct language, using images and examples from everyday life, and experimenting with playful methodologies. Learning by playing leads to better results.

→ **STRENGTHEN MEAL SYSTEMS RELATED TO BEHAVIOURAL CHANGE**: to evaluate the real impact of our awareness interventions and sharing of good practices and verify their long-term sustainability. This can be done not only through constant monitoring of activities, but also by making use of the collaboration of impact assessment agencies, universities and research centres specialised in behavioural change, which could increase our know-how and contribute to the creation of innovative MEAL methodologies.

Annexes

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GLOBAL REGIONS

The division into geographical areas used for this Atlas was chosen arbitrarily by WeWorld to match the different sections to the regions of operational intervention of the organisation.

AFRICA

Algeria
Angola
Benin
Botswana
Burkina Faso
Burundi
Cabo Verde
Cameroon
Central African Republic
Chad
Côte d'Ivoire
Democratic Republic of the Congo
Djibouti
Egypt
Eswatini
Ethiopia
Gabon
Gambia
Ghana
Guinea
Guinea-Bissau
Kenya
Lesotho
Liberia
Madagascar
Malawi
Mali
Mauritania
Mauritius
Morocco
Mozambique
Namibia
Niger
Nigeria
Rwanda
Sao Tome and Principe
Senegal
Sierra Leone
Somalia
South Africa
South Sudan
Sudan
Togo
Tunisia
Uganda
United Republic of Tanzania
Zambia
Zimbabwe

EURASIA

Afghanistan
Armenia
Azerbaijan
Bangladesh
Belarus
Bhutan
Bosnia and Herzegovina
Brunei
Cambodia
China
East Timor
Fiji
Georgia
Japan
Kazakhstan
Kyrgyzstan
Laos
Malaysia
Maldives
Moldova
Mongolia
Myanmar
Nepal
North Korea
North Macedonia
Pakistan
Papua New Guinea
Philippines
Singapore
South Korea
Sri Lanka
Tajikistan
Thailand
Turkey
Turkmenistan
Ukraine
Uzbekistan

GLOBAL NORTH

Andorra
Australia
Austria
Belgium
Bulgaria
Canada
Croatia
Czechia
Denmark
Estonia
Finland
France
Germany
Gibraltar
Greece
Greenland
Hungary
Iceland
Ireland
Italy
Latvia
Liechtenstein
Lithuania
Luxembourg
Malta
Monaco
Netherlands (Kingdom of the)
New Zealand
Norway
Poland
Portugal
Romania
San Marino
Slovakia
Slovenia
Spain
Sweden
Switzerland
United Kingdom
United States of America

LATIN AMERICA AND THE CARIBBEAN

Antigua & Barbuda
Argentina
Aruba
Bahamas
Barbados
Belize
Bolivia
Brazil
Cayman Islands
Chile
Colombia
Costa Rica
Cuba
Dominica
Dominican Republic
Ecuador
El Salvador
French Guiana
Grenada
Guadeloupe
Guatemala
Guyana
Haiti
Honduras
Jamaica
Martinique
Mexico
Nicaragua
Panama
Paraguay
Peru
Puerto Rico
Saint Barthélemy
St. Kitts & Nevis
St. Lucia
St. Vincent and the Grenadines
Suriname
Trinidad & Tobago
Turks & Caicos Islands
Uruguay
Venezuela
Virgin Islands

MIDDLE EAST

Bahrain
Iran
Iraq
Israel
Jordan
Kuwait
Lebanon
Oman
Palestine
Qatar
Saudi Arabia
Syria
United Arab Emirates
Yemen

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THEMATIC INSIGHTS AND SDGS TARGETS

SDGs	Thematic insights and SDGs targets						
	WASH and **HEALTH**	**WASH** and **INCLUSION**	**WASH** and **COMMUNITY-RESILIENCE**	**WASH** and **CLIMATE**	**WASH** and **CHILDREN'S RIGHTS**	**WASH** and **GENDER EQUALITY**	**WASH** and **BEHAVIOURAL CHANGE**
1 NO POVERTY		Target 1.4 By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance Target 1.5 By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters		Target 1.5 By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters		Target 1.4 By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance	Target 1.b Create sound policy frameworks at the national, regional and international levels, based on pro-poor and gender-sensitive development strategies, to support accelerated investment in poverty eradication actions
2 ZERO HUNGER	Target 2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons	Target 2.1 By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round Target 2.3 By 2030, double the agricultural productivity and incomes of small-scale food producers, in particular women, indigenous peoples, family farmers, pastoralists and fishers, including through secure and equal access to land, other productive resources and inputs, knowledge, financial services, markets and opportunities for value addition and non-farm employment Target 2.4 By 2030, ensure sustainable food production systems and implement resilient agricultural practices that increase productivity and production, that help maintain ecosystems, that strengthen capacity for adaptation to climate change, extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality		Target 2.4 By 2030, ensure sustainable food production systems and implement resilient agricultural practices that increase productivity and production, that help maintain ecosystems, that strengthen capacity for adaptation to climate change, extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality	Target 2.1 By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round Target 2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons	Target 2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons Target 2.3 By 2030, double the agricultural productivity and incomes of small-scale food producers, in particular women, indigenous peoples, family farmers, pastoralists and fishers, including through secure and equal access to land, other productive resources and inputs, knowledge, financial services, markets and opportunities for value addition and non-farm employment	
3 GOOD HEALTH AND WELL-BEING	Target 3.2 By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births Target 3.3 By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases Target 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes Target 3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination Target 3.c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States Target 3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks			Target 3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination Target 3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks	Target 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes	Target 3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births Target 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes	Target 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes Target 3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks

SDGs	Thematic insights and SDGs targets						
	WASH and **HEALTH**	**WASH** and **INCLUSION**	**WASH** and **COMMUNITY-RESILIENCE**	**WASH** and **CLIMATE**	**WASH** and **CHILDREN'S RIGHTS**	**WASH** and **GENDER EQUALITY**	**WASH** and **BEHAVIOURAL CHANGE**
4 QUALITY EDUCATION	Target 4.7 By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development	Target 4.4 By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship Target 4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations			Target 4.1 By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes Target 4.2 By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education Target 4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations Target 4.7 By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development Target 4.a Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all	Target 4.3 By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university Target 4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations Target 4.7 By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development Target 4.a Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all	Target 4.c By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing States
5 GENDER EQUALITY	Target 5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences		Target 5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life		Target 5.1 End all forms of discrimination against all women and girls everywhere	Target 5.1 End all forms of discrimination against all women and girls everywhere Target 5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate Target 5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life Target 5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences Target 5.a Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws Target 5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels	Target 5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels

SDGs	Thematic insights and SDGs targets						
	WASH and **HEALTH**	**WASH** and **INCLUSION**	**WASH** and **COMMUNITY-RESILIENCE**	**WASH** and **CLIMATE**	**WASH** and **CHILDREN'S RIGHTS**	**WASH** and **GENDER EQUALITY**	**WASH** and **BEHAVIOURAL CHANGE**
6 CLEAN WATER AND SANITATION	Target 6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situation Target 6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally	Target 6.1 By 2030, achieve universal and equitable access to safe and affordable drinking water for all Target 6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations	Target 6.a By 2030, expand international cooperation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling and reuse technologies Target 6.b Support and strengthen the participation of local communities in improving water and sanitation management	Target 6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally Target 6.4 By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity Target 6.6 By 2020, protect and restore water-related ecosystems, including mountains, forests, wetlands, rivers, aquifers and lakes Target 6.a By 2030, expand international cooperation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling and reuse technologies		Target 6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations	Target 6.b Support and strengthen the participation of local communities in improving water and sanitation management
7 AFFORDABLE AND CLEAN ENERGY	Target 7.b By 2030, expand infrastructure and upgrade technology for supplying modern and sustainable energy services for all in developing countries, in particular least developed countries, small island developing States, and land-locked developing countries, in accordance with their respective programmes of support			Target 7.2 By 2030, increase substantially the share of renewable energy in the global energy mix Target 7.a By 2030, enhance international cooperation to facilitate access to clean energy research and technology, including renewable energy, energy efficiency and advanced and cleaner fossil-fuel technology, and promote investment in energy infrastructure and clean energy technology			
8 DECENT WORK AND ECONOMIC GROWTH		Target 8.5 By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value					
9 INDUSTRY, INNOVATION AND INFRASTRUCTURE				Target 9.4 By 2030, upgrade infrastructure and retrofit industries to make them sustainable, with increased resource-use efficiency and greater adoption of clean and environmentally sound technologies and industrial processes, with all countries taking action in accordance with their respective capabilitie			
10 REDUCED INEQUALITIES		Target 10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status				Target 10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status	Target 10.3 Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard
11 SUSTAINABLE CITIES AND COMMUNITIES		Target 11.1 By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums		Target 11.4 Strengthen efforts to protect and safeguard the world's cultural and natural heritage Target 11.b By 2020, substantially increase the number of cities and human settlements adopting and implementing integrated policies and plans towards inclusion, resource efficiency, mitigation and adaptation to climate change, resilience to disasters, and develop and implement, in line with the Sendai Framework for Disaster Risk Reduction 2015-2030, holistic disaster risk management at all levels			

SDGs	Thematic insights and SDGs targets						
	WASH and **HEALTH**	**WASH** and **INCLUSION**	**WASH** and **COMMUNITY-RESILIENCE**	**WASH** and **CLIMATE**	**WASH** and **CHILDREN'S RIGHTS**	**WASH** and **GENDER EQUALITY**	**WASH** and **BEHAVIOURAL CHANGE**
12 RESPONSIBLE CONSUMPTION AND PRODUCTION				Target 12.2 By 2030, achieve the sustainable management and efficient use of natural resources Target 12.5 By 2030, substantially reduce waste generation through prevention, reduction, recycling and reuse Target 12.8 By 2030, ensure that people everywhere have the relevant information and awareness for sustainable development and lifestyles in harmony with nature Target12.a Support developing countries to strengthen their scientific and technological capacity to move towards more sustainable patterns of consumption and production			
13 CLIMATE ACTION			Target 13.1 Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries Target 13.3 Improve education, awareness-raising and human and institutional capacity on climate change mitigation, adaptation, impact reduction and early warning Target 13.b Promote mechanisms for raising capacity for effective climate change-related planning and management in least developed countries and small island developing States, including focusing on women, youth and local and marginalized communities	Target 13.1 Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries Target 13.3 Improve education, awareness-raising and human and institutional capacity on climate change mitigation, adaptation, impact reduction and early warning Target 13.b Promote mechanisms for raising capacity for effective climate change-related planning and management in least developed countries and small island developing States, including focusing on women, youth and local and marginalized communities	Target 13.3 Improve education, awareness-raising and human and institutional capacity on climate change mitigation, adaptation, impact reduction and early warning		
14 LIFE BELOW WATER				Target 14.1 By 2025, prevent and significantly reduce marine pollution of all kinds, in particular from land-based activities, including marine debris and nutrient pollution			
15 LIFE ON LAND				Target 15.9 By 2020, integrate ecosystem and biodiversity values into national and local planning, development processes, poverty reduction strategies and accounts			
16 PEACE, JUSTICE AND STRONG INSTITUTIONS			Target 16.6 Develop effective, accountable and transparent institutions at all levels Target 16.7 Ensure responsive, inclusive, participatory and representative decision-making at all levels		Target 16.2 End abuse, exploitation, trafficking and all forms of violence against and torture of children	Target 16.1 Significantly reduce all forms of violence and related death rates everywhere	Target 16.10 Ensure public access to information and protect fundamental freedoms, in accordance with national legislation and international agreements
17 PARTNERSHIPS FOR THE GOALS			Target 17.6 Enhance North-South, South-South and triangular regional and international cooperation on and access to science, technology and innovation and enhance knowledge sharing on mutually agreed terms, including through improved coordination among existing mechanisms, in particular at the United Nations level, and through a global technology facilitation mechanism Target 17.9 Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the Sustainable Development Goals, including through North-South, South-South and triangular cooperation Target 17.17 Encourage and promote effective public, public-private and civil society partnerships, building on the experience and resourcing strategies of partnerships	Target 17.6 Enhance North-South, South-South and triangular regional and international cooperation on and access to science, technology and innovation and enhance knowledge sharing on mutually agreed terms, including through improved coordination among existing mechanisms, in particular at the United Nations level, and through a global technology facilitation mechanism			


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WeWorld is an independent Italian organization active for over 50 years in development cooperation and humanitarian aid projects that aim to guarantee people's rights, especially among the most vulnerable communities. WeWorld stands with people on the margins, geographical or social, so they can be at the centre.
Its projects - **165 in 27 countries** including Italy – promote human and economic development, so that people can become active agents of their own change.
With more than **10 million direct beneficiaries** and **54 million indirect beneficiaries**, WeWorld focuses on **human rights, humanitarian aid, food security, water, health and hygiene, education, socio-economic development and environmental protection, global citizenship education and international volunteering.**
WeWorld works in: **Italy, Syria, Lebanon, Palestine, Libya, Tunisia, Afghanistan, Burkina Faso, Benin, Democratic Republic of Congo, Burundi, Kenya, Tanzania, Mozambique, Mali, Niger, Bolivia, Brazil, Nicaragua, Ecuador, Haiti, Cuba, Peru, India, Nepal, Thailand, Cambodia, Ukraine, Moldova.**

Mission

We work for girls, boys, women and youth, actors of change in every community for a fairer and more inclusive world.
We support people overcoming emergencies and we guarantee a life with dignity, opportunities and a better future through human and economic development programs (in the framework of the 2030 Agenda).

Vision

We strive for a better world where everyone, especially women and children, must have equal opportunities and rights, access to resources, to health, to education and to decent work.
A world in which the environment is a common good to be respected and preserved; in which war, violence and exploitation are banned. A world where nobody is left behind.

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