By WAWI Secretariat

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<td>Area Development Program</td>
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<td>CBO</td>
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<td>WASH</td>
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1. EXECUTIVE SUMMARY

The West Africa Water Initiative was launched in 2002 to improve the health and well being of families and communities in Ghana, Mali and Niger. Over its five years of existence, very significant contributions were made in the three countries for the achievement of WAWI objectives. Annual regional meetings were held in rotation in Mali, Ghana and Niger to allow all partners to review the achievements and challenges encountered during the year. In 2007, USAID/ARD completed a Mid-Term Status Review to provide a comprehensive assessment of the partnership in meeting the four stated objectives:

- **Objective 1: ACCESS TO SAFE WATER** - “Significantly increased access to safe water by rural households in all three countries has been achieved under WAWI assistance.”

- **Objective 2: REDUCTION IN WATER-RELATED DISEASES** - “There is not enough data to show this objective is being met, although many partners are providing hygiene improvement messages in the target communities, and qualitative evidence indicates that the partnership is having a positive impact.”

- **Objective 3: SUSTAINABLE WATER MANAGEMENT** - “It is difficult to determine whether this objective of sustainable water management is being met in practice due to the short time WAWI has been in existence. However, important steps are being taken to ensure that this objective is being met.”

- **Objective 4: EFFECTIVE PARTNERSHIP** - “There have been significant achievements under this objective, but there is still considerable scope for improvement, and this objective is not being met in practice. ... WAWI can best be described as a work in progress.”

In addition to the Mid-Term Status Review accomplished by USAID/ARD, the Conrad N. Hilton Foundation conducted a WAWI review and presented the results at the WAWI Headquarters Meeting in February 2008 in Washington D.C. The purpose of this assignment is to generate a consolidated WAWI final evaluation report mainly based on the Mid-Term Status Review done by USAID/ARD and the CNHF’s recent review.

2. BACKGROUND

The World Summit on Sustainable Development has formally endorsed the "partnership" model as an important means for action. Organizations around the world are stepping forward to strengthen existing alliances and foster new collaborations to advance progress on achieving Agenda 21 and Millennium Declaration Goals.

As part of this global movement toward partnership, the West Africa Water Initiative (WAWI) was born. Inspired by the vision of the Conrad N. Hilton Foundation, the Initiative grew from
years of experience with the international NGO World Vision and other partners in Ghana to provide rural water supply and sanitation as the entry point for community development.

In 2002, the CNHF made a bold commitment to expand its long-standing efforts in Ghana, Mali, and Niger and to add a peri-urban focus, in addition to the existing rural focus, to the WAWI work. While the core emphasis of the CNHF remains the link between water and human health—particularly diseases such as trachoma, guinea worm, and diarrhea—the need for attention to a broader water management context was recognized and embraced.

Several other leading organizations in international water management were invited to engage with national and local governments, citizen groups, and communities in West Africa, and jointly address critical human health needs, poverty alleviation, and sustainable development through better management of water resources. In its phase I, WAWI included the following agencies in addition to the government services in the 3 countries:

- The Carter Center/Global 2000
- Conrad N. Hilton Foundation (CNHF)
- Cornell International Institute for Food, Agriculture and Development (CIIFAD)
- Desert Research Institute (DRI)
- Helen Keller International (HKI)
- International Trachoma Initiative (ITI)
- Lions Clubs International Foundation (LCIF)
- United Nations Children's Fund (UNICEF)
- United Nations Foundation (UNF)
- United States Agency for International Development/Associates in Rural Development Inc. (USAID/ARD)
- WaterAid (WA)
- Winrock International (WI)
- World Chlorine Council (WCC)
- World Vision (WV)

3. RESULTS

OBJECTIVE 1: INCREASED ACCESS TO WATER AND SANITATION

1.1. Households have access to safe water

Achievements
Significantly increased access to safe water by rural households in all three countries has been achieved under WAWI assistance:

In Ghana:
- 679 wells drilled/equipped and 38 old systems rehabilitated
- 16 small water supply systems constructed.

In Mali:
- 721 wells drilled (78 wells in progress: WV 9, UNICEF 69)
- 6 small water supply systems constructed. (3 in progress at WV)

In Niger:
- 228 wells drilled/equipped and 61 old systems rehabilitated.
✓ 131 school health and sanitation clubs established

- Low income urban settlements were successfully targeted for interventions under WAWI, through WaterAid and its local NGO partners. In Ghana, three small town water systems in Tamale have been established and transferred successfully to community Water Boards. In Mali, 15 water points have been rehabilitated and 207 latrines constructed in peri-urban Bamako.
- Implementation of innovative and flexible approaches has facilitated increased access to drinking water and sanitation services by low income urban residents in Bamako.
- Some community managed small town water systems in Ghana have made provision for the elderly and disabled to collect water free of charge since they are unable to pay prescribed fees.
- Geophysical investigations and technical support by DRI have resulted in increased drilling success rates for World Vision in Mali and Niger.
- World Vision Mali is successfully using the skills and capacities of private and public agencies to achieve project goals for hand pump installation and technical training.
- 1256 volunteers and artisans have been trained and provided with pump repairing tools. In all boreholes drilled by WV, water quality have been tested by analyzing major ions (Ca, Mg, Na, K, ..) and bacterial tests undertaken in National Water Quality Lab in Bamako and trace element by DRI Lab in Nevada US.
- A five piezometer network equipped with data loggers have been set up in Bla district to follow aquifers’ fluctuations (Charge and discharge)
- UNICEF and ARD are working through private drilling companies in all three countries as an alternative to NGO service providers. Also, in Niger, with ARD/USAID support, based on its methodology developed regarding small scale irrigation technologies promotion, Winrock International implemented a successful test of low cost water supply technology (i.e. low cost tubewells and water pumps locally manufactured).
- UNICEF, ARD, and local partners have placed considerable emphasis on rehabilitation of existing boreholes to increase access to water at reduced cost.

**Challenges**

- There is still a great unmet need for safe water in many rural areas of Ghana, Niger and Mali.
- There is a lack of data to determine precise coverage levels for access to safe water in rural areas. Better monitoring of numbers of functioning water points and population served is needed.

### 1.2 Hygiene and sanitation facilities in place and in use

**Achievements**

- Large numbers of latrines have been constructed in all three countries under WAWI assistance:
  - In Ghana, 6,257 household latrines and 100 school latrine blocks;
  - In Mali, 20,442 household latrines and 127 school latrine blocks.
  - In Niger, 2,469 household latrines and 75 school latrine blocks.
• Improved school hygiene and sanitation facilities have been constructed in all three countries through UNICEF, but coverage and service levels remain low. Considerable additional numbers of facilities are required.
• At the community level, the volunteer WATSAN management committees are proving to be efficient and cost-effective points of contact for government and other partners. Women are increasingly involved in these committees.
• In Mali, “latrine replication” has rapidly changed sanitation situations at the household level in some areas. Heads of households join to be more efficient in facilitating and funding the construction of their household latrines together.
• The Lions Club brings a sound support (~ $100,000) to WV, Carter Center, PNLC & HKI in Water supply, Latrines promotion, sensitization campaign by training teachers, local radio’s animators and broadcasting diseases related messages.

Challenges
• It was noted that coverage levels for sanitation facilities are low in all areas in which WAWI is working (unfortunately there are very limited amounts of high resolution data to quantify this assertion).
• Standardized approaches, methodologies and costs for constructing water and sanitation facilities are needed. The planned development of a WAWI operating model should include these aspects.

1.3. Expanded water availability for agricultural purposes (drip irrigation and livestock watering) at selected villages

Achievements
• Winrock implemented a very successful smallholder micro-irrigation project in Ghana, Niger and Mali: 23 manufacturers and retailers trained and selling by themselves to farmer clients affordable irrigation technologies, 783 technologies (i.e. irrigation pumps, drip kits, tubewells for irrigation) sold to clients.
• Rural communities have been provided access to water, drip irrigation equipment and other inputs to enable farmers to undertake dry season vegetable production: For example, Winrock International worked with WV in Ghana on the establishment of 23 new community gardens for dry season farming, with an average earning per person per season of $100.
• WV Niger has set up small-irrigated vegetable gardens for women’s groups, with most agricultural produce consumed within the household and any excess sold at the market. This activity is resulting in improved household nutrition levels and is also enabling women to earn some income.

Challenges
• Farmers want to expand beyond the small plots of land cultivated under WAWI projects, but find it difficult to access resources to acquire the necessary inputs. Incorporating access to micro-credit is one solution.
• Continue (expand the area covered, develop additional range of low cost technologies and services, reinforce the supply chain being developed) to disseminate affordable technologies for dry season farming is a key point to expand sustainable water availability for agriculture purpose.
OBJECTIVE 2: REDUCTION IN WATER AND SANITATION RELATED DISEASES

2.1 Increased community awareness and understanding of prevention of trachoma, guinea worm and diarrheal diseases.

Achievements
• Many WAWI partners are actively involved in increasing awareness and understanding regarding the prevention of water-related diseases through hygiene education and promotion at household and community level, organization of events, use of theatre and broadcasting of messages on public radio.
• Attention is being given to training-of-trainers such as community health agents and teachers. Their ongoing sensitization efforts will help ensure continued reinforcement of health and hygiene messages.
• Effective IEC tools and materials for community hygiene education and promotion have been developed by UNICEF/Ghana in collaboration with WAWI partners.

Challenges
• There is no common hygiene and sanitation strategy within WAWI, and WAWI partners usually follow individual institutional approaches to implement hygiene activities. WAWI partners are at times employing inconsistent hygiene behavior change messages and methodologies and not all partners are making good use of available IEC materials.

2.2 Communities practicing appropriate behaviors for the prevention of trachoma, guinea worm and diarrheal diseases at the household and individual levels

Achievements
• There have been selective achievements in disease reduction recorded at national scale in all countries. Trachoma prevalence has been greatly reduced and levels of guinea worm have also been declining. In a recent report, guinea worm disease in Ghana has been reduced by 91%, mostly in WAWI operational areas. Ghana has the second highest number of guinea worm cases in the world. However, the specific contribution of WAWI activities to these trends has not been quantified.
• Indicators show that increased washing of hands and faces of children is being achieved in parts of Niger, but the data available is very limited and WAWI's specific contribution is unquantified.
• USAID along with other WAWI partners have implemented a Behavior Change approach to communicating WASH messages and information, which has shown to be very effective in resulting in adoption of the desired practices particularly in Ghana. Following a hand washing campaign that employed this approach, 100% of the households that attended were practicing the desired behavior.
• Trachoma prevalence surveys have been carried out in all countries by ITI, WV and other partners. These gathered important base line data which will enable health impacts to be better measured in the future.
• Community awareness-building exercises have resulted in increased demand for water and sanitation facilities in Ghana. As a result, beneficiaries are very willing to contribute labor and cash for the provision of water and sanitation facilities in their community and household. Unfortunately, the high costs of latrines in Ghana results in the inability to meet this rising demand.
Challenges

- There is limited/no monitoring data available to determine the impact of health and hygiene interventions on behavior. In future efforts, it would be advisable for partners to collect and report on two observational indicators – children’s faces are clean (yes/no) and presence of feces in the household compound (yes/no).
- It is difficult to achieve hygiene-related behavior change in many traditional communities. Sustained government involvement in hygiene promotion, such as is happening in Mali, is one important ingredient in realizing behavior changes.

2.3. Increased school health and hygiene promotion.

Achievements

- Significant numbers of students have received improved health and hygiene education as a result of WAWI interventions, and are putting this into practice at school and at home.
- UNICEF has been taking the lead in provision of school sanitation facilities and hygiene education. Other partners are also providing significant inputs (World Vision, ITI, HKI and WaterAid).
- Integration of health and hygiene into the school curriculum has improved through WAWI partner efforts in Ghana and Mali; however efforts have not been as successful in Niger.
- Teachers, school staff and community health offices have been trained using a newly developed training curriculum.
- School health and hygiene clubs/committees have been formed to assist in the management of school WATSAN facilities and to promote good hygiene practices among students.
- Simple measures such as washing of hands with soap and use of covered earthenware jars for water storage are reinforced through school hygiene promotion messages.

Challenge

- The transfer of healthy habits that are learned and practiced at school to the home setting is not easy. Families and communities should be involved more in school health and hygiene education programs.

OBJECTIVE 3: SUSTAINABLE WATER MANAGEMENT

3.1 Communities (both genders) mobilized, organized and empowered to own and manage water facilities for sustainability

Achievements

- Water and sanitation (WATSAN) committees have been established in all rural communities and members trained in management and O&M of facilities.
- More formal and specialized Water Boards have been found to be more effective in small towns and peri-urban areas in Ghana with mechanized water systems.
- Literacy training has been carried out by WV in Ghana, Mali and Niger, enabling community members (especially women) to play a more effective role in water system management.
• Funds for operation and maintenance are being raised in most cases: rural communities are contributing to maintenance funds, and peri-urban households are paying for water consumed, but the extent of this practice and amounts of funds collected are generally not recorded by WAWI partners.

**Challenge**

• Women need to be better integrated into WATSAN committees and Water Boards, and play a bigger role. While a concerted effort has been made to involve women and men equally in community decision-making, management, and maintenance of water and sanitation facilities, women’s participation and engagement is still lagging in some cases. Their participation also needs to be better documented by WAWI partners (quantitatively and qualitatively).

### 3.2 Enabling environment created

**Achievements**

• WAWI partners have participated in development or revision of government policies for water, environmental sanitation and trachoma.

• Partners are engaging with National and Regional stakeholders to support policy actions and increased commitment toward the MDG targets for water and sanitation. This role is being reinforced through ongoing advocacy analysis and training provided by WaterAid.

**Challenge**

• The involvement of local government in assuring sustainable water/sanitation delivery is limited, due to lack of financial resources and qualified professional staff. Building their capacity must be an ongoing process to enhance their participation.

### 3.3 Sound environmental management practiced

**Achievements**

• WAWI partners are active in the management of groundwater and surface water resources. This includes monitoring of ground water levels and water quality; collection of data on water resources, water facilities and service levels; undertaking geophysical investigations; and collaboration with similar government efforts in each country.

• World Vision along with CIIFAD is piloting a Natural Resource Management and Sustainable Livelihoods Project in a few communities in Ghana. This project has employed sources for livelihood such as dry season gardening, rabbitry, and tree nurseries that will also restore and maintain a healthy and fruitful environment.

• In Mali, CIIFAD is supporting one Malian Teacher researcher and two undergraduate students of ENI to undertake a thesis research on drip irrigation and end of study research on surface and underground water resources at WAWI area in San zone.

• Hydro geological database management systems have been piloted and water resource mapping tools developed by DRI, along with associated training to project and government staff.

**Challenges**

• WAWI does not fully participate in ongoing national dialogues about IWRM in each country.
• There is a lack of awareness and capacity related to water resources management and sustainability among some WAWI partners, and IWRM and environmental sustainability messages are not consistently communicated in community mobilization and training work.

3.4 Livelihood and income generation promoted

Achievements
• Micro-irrigation technologies are enabling farmers to realize significant additional income through sale of produce, particularly during the dry season: sales by manufacturers and retailers of 783 affordable irrigation technologies generate estimated $456,000 of increasing incomes over life of technology life, and estimated $1,560,000 over life of technology life &continued sales (because of supply chain establishment.
• Some successful practices (see section 13 above) to ensure profitable irrigated farming include training of and support from pump and drip kit manufacturer’s representatives, strengthening of supply chains, proper training of farmers in equipment maintenance, access to credit and assistance with marketing.
• Market gardening and the raising of small animals are providing the opportunity for women in Niger to generate significant revenue.

Challenges
• Farmers lack adequate financial resources to fully exploit the increased availability of water and new irrigated farming skills. Targeted micro-credit facilities are needed to enable farmers to expand their irrigated dry season gardens.
• Problems with land acquisition by women is hindering their irrigated gardening activities in Niger, since common laws which govern access to land do not permit women the right of ownership. Advocacy to revise these laws is needed.

3.5 Research capacities developed and research findings being utilized

Achievements
• Various studies have been undertaken by WAWI partners: CIIFAD on community participation, gender issues, and hydrological sustainability; WV on the health impacts of water and hygiene education interventions, ITI on the impact of the fight against trachoma, ARD on drilling costs and gender mainstreaming, and WaterAid on water sector national policy and funding contexts.
• Research into water quality problems has been carried out in affected areas of Ghana by WV and DRI.
• Innovative low-cost water treatment technique for arsenic removal has been tested in Ghana by WV. To date, WV has also installed over 60 fluoride treatment systems 60 wells in Ghana. Research is underway to also locally develop a fluoride removal plant.

Challenges
• Research results have been inconsistently documented and published for distribution among WAWI partners and the broader water & sanitation community.
• Better use of research results is necessary in order to justify efforts in this area. Action plans and support is needed to permit application of acquired knowledge.
3.6 All local/community partners work collaboratively with communities for sustainability

Achievements
• Partners are working collaboratively with communities to achieve all the goals set out by the partnership.
• WAWI partners have made concerted efforts to engage appropriate government institutions at all levels in issues such as siting of water points, sharing hydrological information, and capacity building.
• The private sector is providing some inputs to WAWI and jointly implementing local community projects, but their involvement could be effectively increased.

Challenges
• Efforts to collaborate and participate with non-WAWI actors who are involved in the WASH sector in each country were not emphasized enough. This has been facilitated by the Secretariat.

OBJECTIVE 4: EFFECTIVE PARTNERSHIP

4.1 WAWI HQ and Country Teams operational with shared visions and well committed to the program

Achievements
• The WAWI Secretariat was set up January 2003 in Accra to coordinate the affairs of WAWI. While functioning effectively in some areas of its perceived mandate, its role needed to be reviewed and more clearly defined.
• National Steering Committees have been established in all three countries but are at various stages of development.
• The Working Group in Tamale is actively playing an effective role in planning and coordinating implementation in the field. Their role should continue unchanged and should be copied in other countries.
• World Vision was assigned the role of Lead NGO when WAWI was founded and is providing considerable support to the partnership and operations of the Secretariat.
• The ARD regional office in Mali is playing an effective role in WAWI, both as regional manager of USAID contracts and in supporting the partnership.
• Government partners in all countries are playing an active and helpful role in WAWI with planning and coordination, regulation, etc.

Challenges
• In the Mid-Term Assessment, it was identified that WAWI needed a seat or head in each country to provide a stronger point of focus, which is nongovernmental and non-partner focused. This has been provided through WV and the Conrad N. Hilton Foundation funding.
• The role of the NSCs in all countries needs to be assessed.
• All implementing partners want a partnership of equals, with more balanced funding and reduced influence of World Vision. While World Vision’s support as lead NGO is appreciated, the role of one partner acting as a Lead Agency needs to be rethought, since it is perceived to promote inequality within the partnership.
• Governments lack adequate resources to support certain WAWI activities, such as meetings.

4.2 **Partnership defines WAWI strengths (including activities, tools, approaches) to be shared and harmonized**

**Achievements**
• Almost all partners felt that WAWI was indeed valuable and they want to remain in the partnership.
• Many advantages mentioned were centered on increased impact, more effective and efficient interventions, improved networking and knowledge management, etc.
• The involvement of government personnel and CBOs in providing training, as well as supervision and monitoring of WASH interventions, has proven effective in Mali. Their participation will also foster sustainability.

**Challenges**
• There is a frustration that WAWI is not realizing its full potential and a feeling that the partnership needs to ‘gel’. There is still considerable scope for improvement in how the partners interact.
• All implementing partners want a partnership of equals, with more balanced funding and reduced influence of World Vision.

4.3 **Effective WAWI Alliance managed and compliant with donors, governments and community standards and procedures**

**Achievements**
• A comprehensive Strategic Planning document was drafted, extensively reviewed and approved in early 2006.
• Broader planning during project preparation stages was independently done by the principle donors, Hilton Foundation, World Vision, and USAID. They have been responsible for ensuring that WAWI projects in each country are in line with objectives and that they further the interests of the partnership. There was not very much collaboration or involvement among all partners.
• The WAWI Working Group based in Tamale is very active in performing field level planning and coordination.
• Partners have played a significant role in delivering advocacy messages.
• Monitoring of water, sanitation and hygiene was done by some partners using their own indicators, enabling them to evaluate impacts and adjust their individual approaches.
• Gender consultants were hired in all three countries and actively worked to improve gender mainstreaming among the partners. Projects would benefit from additional training for partners and greater effort in applying the gender tools that were developed.
• The WAWI hygiene behavior change consultant was replaced by hygiene improvement consultants in each country to avoid language and travel issues and provide high quality technical assistance to partners.

**Challenges**
• Coordination of field level activities is often poor, partly due to confusion about responsibilities. The role of the Secretariat, Lead Agency WV, NSCs, Working
Groups, ARD, funding agencies and national governments in coordination has not been adequately defined.

- The current method of funding by USAID on an annual basis with renewal ‘at the last minute’ caused problems for the partners. USAID should explore ways to commit funds for longer term, as the Hilton Foundation and World Vision already do.
- The bulk of WAWI funding goes to World Vision (approx. 72%), which causes resentment among other partners. More balanced funding is better for a partnership model.
- The collaborative partners such as ITI, HKI, Carter Center, Winrock International and Lions Club are not receiving any funds through WAWI. All partners should receive appropriate funding for WAWI activities to the extent that their interest and intervention areas overlap.
- There is a lack of an effective WAWI-wide data collection and management system due to insufficient resources to collect data on WAWI core indicators, inconsistent or conflicting contractual reporting obligations, and inconsistent institutional methodologies for M&E. Solutions to these problems have been proposed, but have not been executed.

4.4 Enhanced and unified institutional capacity for government and communities

Achievements
- Numerous capacity building workshops were held for WAWI partners; these workshops included gender, strategic plan development, GIS, advocacy, hygiene, water quality and M&E.
- The Secretariat and ARD regional office have provided significant support and inputs to capacity building efforts and should continue their efforts.
- Significant capacity development is being provided in all countries to enable communities to play their role in ensuring sustainable management and operations of water and sanitation facilities. The need for long term institutional support needs to be addressed.

Challenges
- Decentralized local government has limited capacity to support the activities of WAWI. Although they are receiving training under WAWI, considerable additional training and ongoing support is needed.

4. CONCLUSIONS AND RECOMMENDATIONS

OBJECTIVE 1: INCREASED ACCESS TO WATER AND SANITATION

Based on the review, this objective is being well met. Significantly increased access to safe water by rural households in all three countries has been achieved, with over 1,500 wells drilled/rehabilitated and over 25,000 sanitation facilities constructed in Ghana, Mali and Niger. WAWI partners are active in constructing water systems in peri-urban areas and small towns, having rehabilitated and mechanized many existing high yielding wells. They are also providing water for agricultural purposes, with many micro-irrigation systems installed and proven popular with farmers and women (investment by farmers themselves in such technologies). WATSAN sustainability is also being addressed, e.g., hand pump mechanics and artisan masons have been trained and equipped, and are efficiently providing services on demand to communities.
OBJECTIVE 2: REDUCTION IN WATER RELATED DISEASES

Based on the review, there is not enough quantitative data to show that this objective is being met, although qualitative evidence indicates that the partnership is having a positive impact. WAWI partners are providing hygiene improvement messages in the target communities and are actively involved in increasing awareness and understanding regarding the prevention of water related diseases. Community awareness building exercises have reportedly resulted in increased demand for water and sanitation facilities. At the school level, health and hygiene is being better integrated into the school curriculum through WAWI partner efforts in Ghana and Mali. Significant numbers of students have received improved health and hygiene education as a result of WAWI interventions, and are putting this into practice at school and at home. The Behavior Change approach is resulting in adoption of desired healthy behaviors, particularly hand washing. Most importantly, due to partner efforts there have been selective achievements in disease reduction in all countries. Trachoma prevalence has been greatly reduced at national scale, and levels of guinea worm disease have also been declining. However, the specific contribution of WAWI activities to these trends has not been quantified.

OBJECTIVE 3: SUSTAINABLE WATER MANAGEMENT

It is more difficult to determine whether the objective of sustainable water resources or water system management is being met in practice due to the short time that WAWI has been in existence. However, based on the review, important steps are being taken to ensure that this objective will be met. Water and sanitation (WATSAN) committees have been established in all rural communities, members have been trained in management of facilities and funds for operation and maintenance are being raised. WAWI partners have been participating in development or revision of government policies for water, environmental sanitation and trachoma to strengthen the overall enabling environment in which the Initiative operates. Environmental management issues are being addressed at the community level as well as through national level hydrologic analysis and data/information management. Livelihood and income generation activities are also being promoted through Micro-Enterprise Development programs and installation of micro-irrigation systems which enable farmers to generate significant additional income. Valuable research activities are being undertaken, such as hydro-geological and water quality investigations.

OBJECTIVE 4: EFFECTIVE PARTNERSHIP

This objective is not being adequately met in practice. Certainly there have been significant achievements under this objective, but there is still considerable scope for improvement. The WAWI operating model is interesting and unique. If it can be made to work well it can serve as a useful example for other areas and sectors. However, WAWI can be best described as a ‘work in progress’. Almost all partners emphasized that they wanted a partnership of equals, with more balanced funding. The achievements are largely the result of individual organizational effort and not collaborative action, even though pockets of important collaboration do exist. The achievements very clearly reflect the program design of each partner’s grant portfolio. Therefore, the partnership could not expect to have significant impact in some areas if a grant was not made to achieve a particular objective or if a grant is made too far outside an organization’s area of strength or interest.
The following key recommendations have emerged from the review:

- Increase funding to all full partners to balance out the equity status, and ensure sufficient resources for all partners.
- Ensure donor commitment of resources over the longer term (at least 5 years), as the CNHF already does.
- Carry out 3 to 5 year program planning at the country level linked to the project selection, preparation and funding process, and annual action plans to realize the longer term plan.
- Find ways and means to work outside the ADP geographic areas, especially to support the work of those partners concerned with trachoma and guinea worm reduction/elimination.

SUCCESS STORIES

- Partnership is best way of integrated and sustainable development: “Together, we are strong” Ex: Yangasso's women garden site (Joint venture amongst WV, WI, CIIFAD)
- Communities investment in activities is a good indicator for sustainability: SanPlat latrines in Kemeni & Touna (WV, WaterAid), Drip equipment (WI)
- If each stakeholder plays its role with effectiveness, we succeed (Engine component)

LESSONS LEARNED

- Thanks to Partnership, approaches can be harmonized
- Sustainability by involving communities in all the process (Revolving Credit): Nafadj
- Program Approach as opposed to project approach. (Integrated development)
- LCIF support / contribution to the World Sight day celebrated in 2006

REFERENCES


