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A drought-affected rural community in Ethiopia searching for water for household use.

2018 WASH THEMATIC REPORT

January – December 2018

Prepared by:

UNICEF Eastern and Southern Africa Regional Office

March 2019

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Abbreviations and acronyms

ACMHM	Africa Coalition for Menstrual Hygiene Management
AMCOW	African Ministers' Council on Water
AWD	Acute watery diarrhoea
ASWA	Accelerating Water and Sanitation for All
BMZ/KfW	German Federal Ministry for Economic Cooperation and Development/Bank for Reconstruction
C4D	Communication for development
CDC	U.S. Centers for Disease Control and Prevention
CLTS	Community-led total sanitation
DRC	Democratic Republic of the Congo
ESAR	Eastern and Southern Africa Region
ESARO	Eastern and Southern Africa Regional Office
EVD	Ebola Virus Disease
GCF	Global Climate Fund
HAC	Humanitarian Action for Children
IFRC	International Federation of Red Cross and Red Crescent Societies
IPC	Infection prevention and control
JMP	Joint Monitoring programme
MHM	Menstrual hygiene management
MICS	Multiple Indicator Cluster Survey
NYHQ	New York Headquarters
ODF	Open defecation free
ORE	ORE: Other Resources - Emergency
ORR	Other Resources – Regular
PD	Programme Division
ROMP	Regional Office Management Plan
RP	Regional priority
RR	Regular resources
SADC	Southern Africa Development Community
SD	Supply Division
SDG	Sustainable Development Goal
SMR	Strategic moment of reflection
SWA	Sanitation and Water for All
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WASH	Water, sanitation and hygiene
WHO	World Health Organization
WiHCFs	WASH in Health Care Facilities
WinS	WASH in Schools

Executive summary

Access to safe drinking water, sanitation and hygiene remains a significant challenge and development impediment in the Eastern and Southern Africa Region (ESAR). The United Nations Children's Fund (UNICEF) Eastern and Southern Africa Regional Office (ESARO) continues to provide technical advice and oversight to 21 UNICEF country offices in the region to improve access to water, sanitation and hygiene (WASH) services. These efforts contribute to three ESARO Regional Priorities (RP): RP1 - Enabling children to survive and thrive; RP 2 - Reducing stunting to provide opportunities for children to realize their full potential; and RP3 - Improving education quality and learning outcomes. In line with UNICEF's global WASH strategy and in support of Sustainable Development Goal (SDG) Goal 6, *"Ensuring availability and sustainable management of water and sanitation for all"*, WASH programming in ESAR focuses on four areas: (i) drinking water supply and environment; (ii) sanitation and hygiene; (iii) WASH in humanitarian settings; and (iv) WASH in institutions.

In 2018, UNICEF recorded several notable achievements, including:

- **Technical support to countries:** Over 50 missions were conducted to support WASH programming in development and humanitarian contexts, primarily on: response to cholera and other health epidemics; Ebola preparedness; refugee response; sanitation programming to end open defecation; climate resilience WASH programming; institutional WASH strengthening; strengthening enabling environments for WASH programming; and support in drinking water programming.
- **Strengthened strategic partnerships and cross-sectoral collaboration** to enhance WASH programming in the region as follows:
 - In collaboration with UNICEF Supply Division and Programme Division (SD/PD-NYHQ), formalized the UNICEF-Lixil sanitation market shaping partnership with implementation initiated in three countries.
 - In collaboration with ESARO's Public and Private Partnerships team, initiated many new investor-focused regional partnerships, including with the European Investment Bank, the German Federal Ministry for Economic Cooperation and Development/Bank for Reconstruction (BMZ/KfW), and the Global Climate Fund (GCF) - to enhance financing in the WASH sector in the region.
 - Continued collaboration with partners, particularly the African Ministers' Council on Water (AMCOW) and the Southern African Development Community (SADC) to strengthen the enabling environment and advocate for WASH programming.
 - Strengthened cross-sectoral programming with Gender (on menstrual hygiene management programming), Social Policy (on WASH financing studies), Communication for Development (C4D) and Health (on implementation of the Regional Cholera Framework), Education (on the WASH in Schools – WinS - deep dive), and Supply on contracting (for WASH services training).
- **On evidence generation and guidance**, developed three WASH in emergencies learning series notes; finalized development of the ESAR Urban WASH and the WASH and infection prevention and control (IPC) training materials for cholera; contributed to a comparative study on C4D approaches on WASH-related behaviours; completed the ESAR regional WinS status study and the WinS deep dive; and developed a framework to monitor the UNICEF-Lixil partnership.

- **Sanitation programming:** A major thrust in 2018 was on initiatives to increase access to basic sanitation services and end open defecation. ESARO rolled out the global game plan to end open defecation in eight countries, which between them have 79 million people practising open defecation (80 per cent of the total population in ESAR who practise open defecation). Implementation of the UNICEF-Lixil sanitation market shaping partnership was also initiated. This partnership aims to support 2.6 million people practising open defecation in Ethiopia, Kenya and Tanzania to access basic sanitation services over the next four years. ESARO also provided technical support to regional and international sanitation initiatives including: the Mahatma Gandhi International Sanitation Convention; the AMCOW sub-regional meetings on Ngor Commitments; and the South-South learning forum on rural sanitation and monitoring in Kenya.
- **Drinking water programming:** ESARO supported water climate programming through support on technical specifications for water programme design and incorporation of climate and resilience issues on WASH programming during strategic moment of reflection (SMR) processes. Technical support was also provided to the Anglophone Africa World Health Organization (WHO)-UNICEF Water Safety Planning Workshop in Rwanda.
- **Health emergencies:** With cholera continuing to be endemic in the region, ESARO supported country offices in the region with the implementation of the Regional Cholera Framework, completed the epidemiological study on cholera hotspots for eight countries and launched a new study for three additional countries. Country offices were supported to develop/strengthen cholera national information management systems and to issue bi-weekly cholera bulletins.

Overall, four targets of the Regional Office Management Plan (ROMP) were met and satisfaction levels for support to country offices remained high based on results of the 2018 client satisfaction survey.

In 2019, ESARO will continue supporting country offices to improve WASH services in the region. With low funding levels becoming a major bottleneck for WASH programming, ESARO will broaden the funding scope of the WASH sector by increasing engagement with non-traditional donors, the private sector and domestic financing. ESARO will continue to support countries to improve WASH services, strengthen monitoring and data systems and increase emphasis on 'sustainability and resilience' on all WASH programming interventions. ESARO will also put a new focus on scaling up WASH programming in schools and health facilities, urban WASH programming and elaboration of national cholera prevention investment plans for identified hotspots.

Thematic funds have been, and will remain, critical at both regional and country levels to support the delivery of WASH results for children, as other funding streams are continually explored.

SECTION 1: Strategic context in 2018

1.1 WASH programming in ESAR

UNICEF ESAR comprises 21 programme countries: Angola, Botswana, Burundi, Comoros, Eritrea, Ethiopia, Eswatini (formerly Swaziland), Kenya, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Rwanda, Somalia, South Africa, South Sudan, Tanzania, Uganda, Zambia and Zimbabwe. WASH programming is carried out in all countries and WASH staff presence is ensured in all countries except Botswana and South Africa.

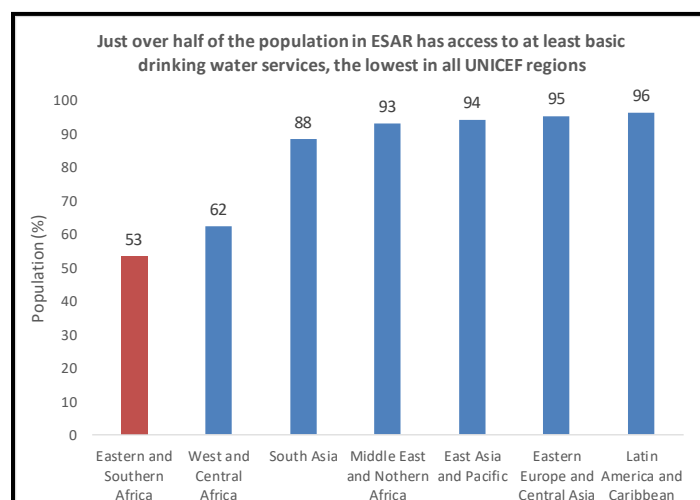
In the ROMP for 2018–2021, WASH as a result area, has accountability to contribute to three RP focus areas: RP1: survive and thrive (mainly through WASH in health care facilities and health emergencies); RP2: reduce stunting (mainly through WASH in communities); and RP3: quality education and learning (through WASH in schools). It has responsibility to contribute in five areas: urbanization, climate change, cross-sectoral programming, systems strengthening and humanitarian action.

1.2 Access to WASH services in ESAR

1.2.1 Drinking water services

With only 53 per cent of the population having access to at least basic drinking water services, ESAR ranks lowest in UNICEF's programming regions¹ (Figure 1). There is wide inter-country variation about access to at least basic drinking water services in the region, ranging from 19 per cent in Eritrea to 85 per cent in South Africa.

Figure 1: Access to drinking water services in ESAR compared to other UNICEF programming regions

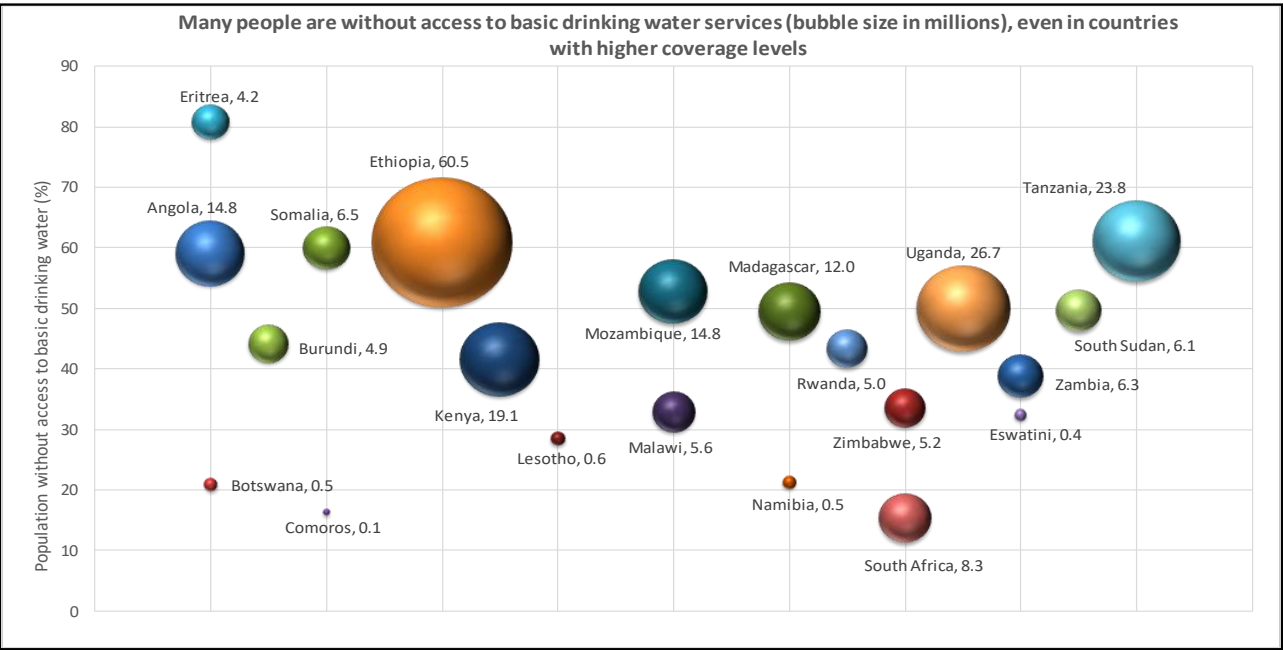


In ESAR, 253 million people have access to at least basic drinking water services (improved sources that require less than 30 minutes to collect); 84 million people can access improved drinking water, but require more than a 30 minutes round-trip for collection; and 142 million people (over 90 per cent of this population live in rural areas) are using unimproved drinking water sources (e.g. from unimproved sources and from untreated surface water). More than three quarters of this population live in seven

¹ WHO-UNICEF 2017. Progress on drinking water, sanitation and hygiene: 2017 update and SDG baselines. Joint Monitoring Programme (JMP) of WHO and UNICEF. Geneva

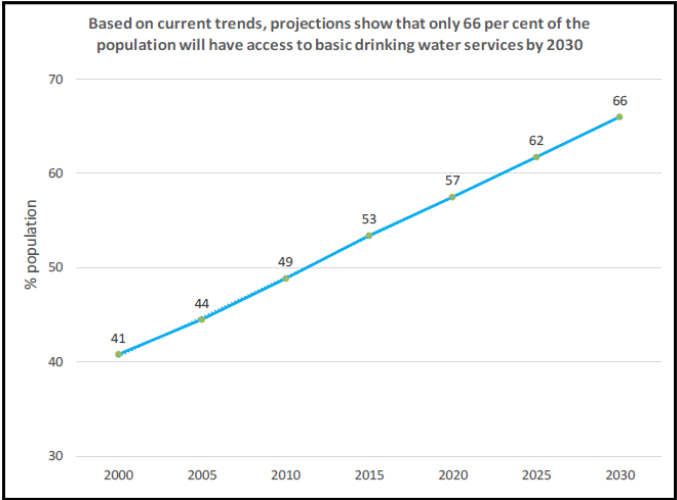
countries: Ethiopia (36 million), Tanzania (20 million), Kenya (15 million), Madagascar, Angola and Mozambique (11 million each) and Uganda (9 million) - See Figure 2.

Figure 2: Number of people in need of basic drinking water services in ESAR



While ESAR has made steady progress in increasing access to drinking water services, a lot more needs to be done. Data on the SDG ambition of safely managed drinking water services is very limited, with only two countries in ESAR (Ethiopia and Uganda) reporting nationally. In Ethiopia, only 28 per cent of population with access to basic drinking water services was reported to have access to safely managed services. In Uganda, the proportion is even lower, standing at only 15 per cent, indicating that most of the improved drinking water sources could be contaminated.

Figure 3: Projections for access to basic drinking water services in ESAR by 2030

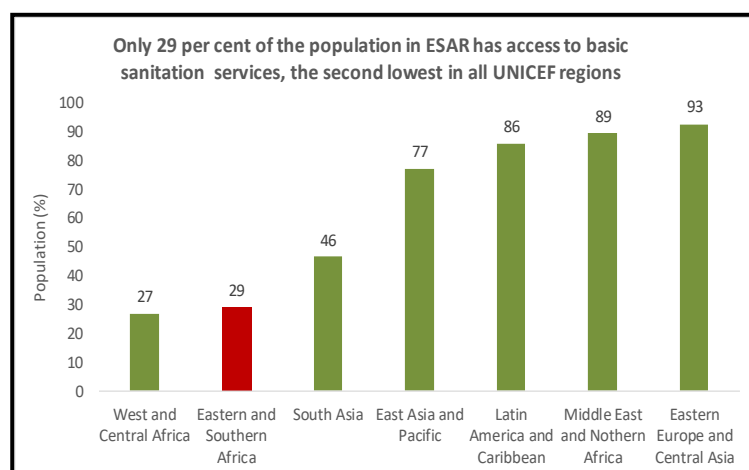


Projections, based on current trends, show that only 66 per cent of the population in ESAR will have access to basic drinking water services by 2030 (See adjacent Figure 3). Progress in increasing access has largely been hindered by climate change especially recurrent droughts, poor management of water supply systems and inadequate sub-sector financing.

1.2.2 Sanitation and open defecation

Compared to UNICEF's seven programming regions, ESAR ranks second lowest in terms of proportion of people having access to basic sanitation services (29 per cent) and has the fourth highest population (340 million) with no access to basic sanitation services (Figure 4). The region ranks third in the practice of open defecation (19 per cent; 98 million people), behind the West and Central Africa and the South Asia regions, which have the highest and second highest populations practising open defecation.

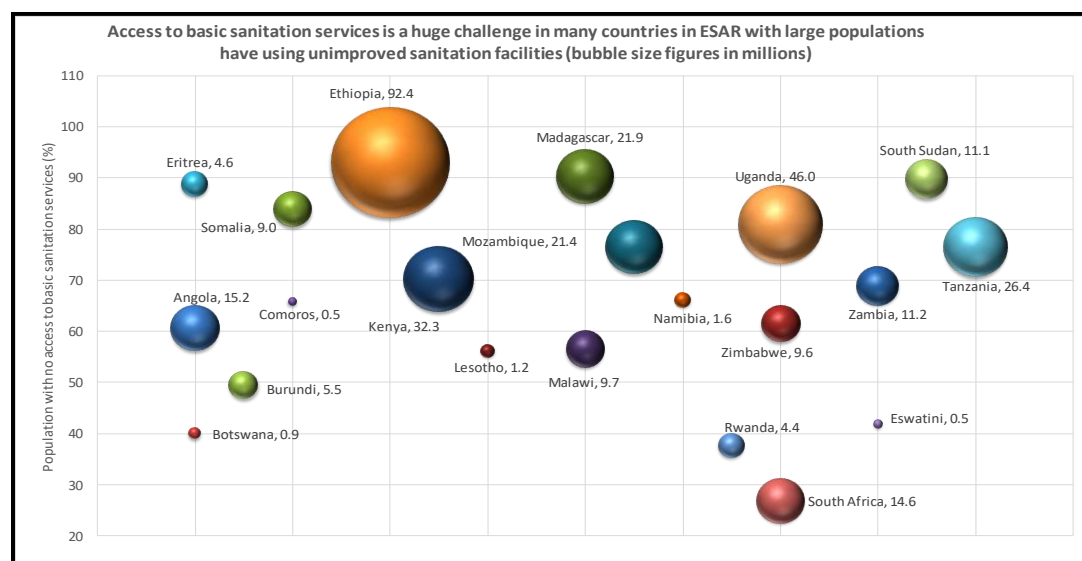
Figure 4: Access to basic sanitation services in ESAR compared to other UNICEF programming regions



Despite some progress, access to basic sanitation services lags behind, even in comparison with access to drinking water services. In addition to the 98 million people practising open defecation, 179 million use unimproved facilities and 63 million use shared improved facilities.

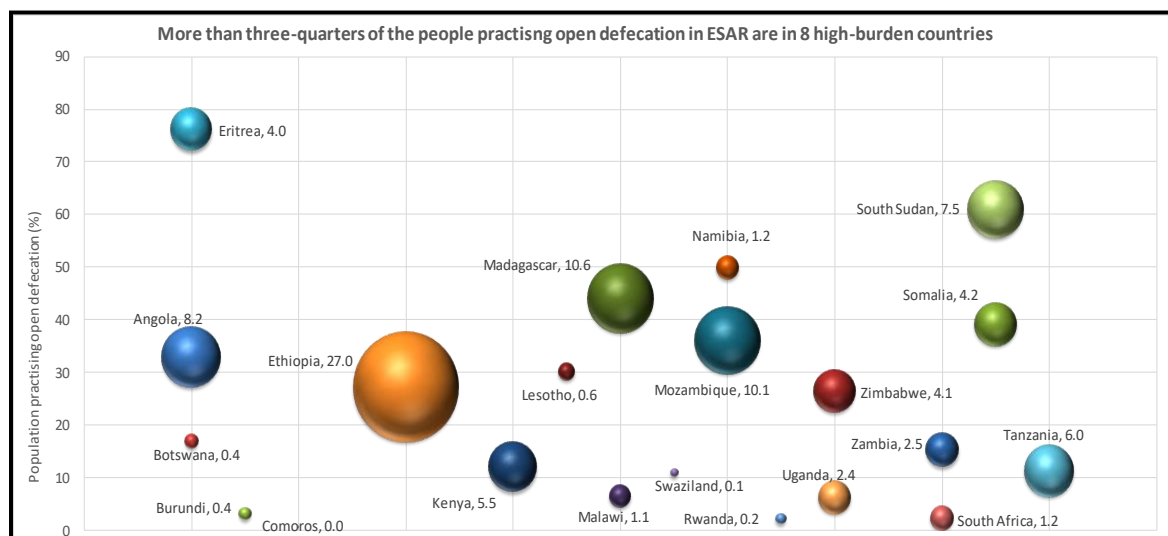
Ethiopia, Uganda, Kenya and Tanzania, have by far the largest number of people in the region with no access to basic sanitation services (Figure 5).

Figure 5: Number of people in need of basic sanitation services in ESAR



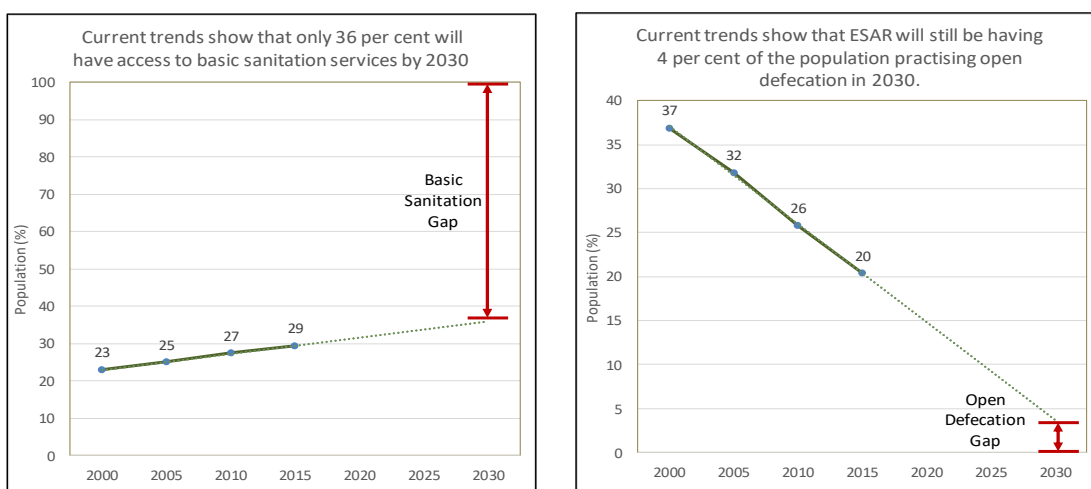
ESAR has 8 of the 26 countries with a high open defecation burden, which are part of UNICEF's global plan to end open defecation. The high-burden countries for open defecation are: Ethiopia (27 million), Madagascar (11 million), Mozambique (10 million), Angola and South Sudan (8 million each), Tanzania (6 million), Kenya (5.5 million), and Eritrea (4 million), but qualifies as high burden as it has high proportion of population (76 per cent) practising open defecation (Figure 6).

Figure 6: Number of people practising open defecation in ESAR



Data on the SDG ambition of safely managed sanitation services is very limited in ESAR, with data reported only from three countries: Somalia (national data, 14 per cent), Ethiopia (only rural data, 4 per cent) and Mozambique (only rural data, 12 per cent). However, even for basic services, current trends show that the region will not attain universal access to sanitation services and will not eliminate open defecation by 2030 (Figure 7).

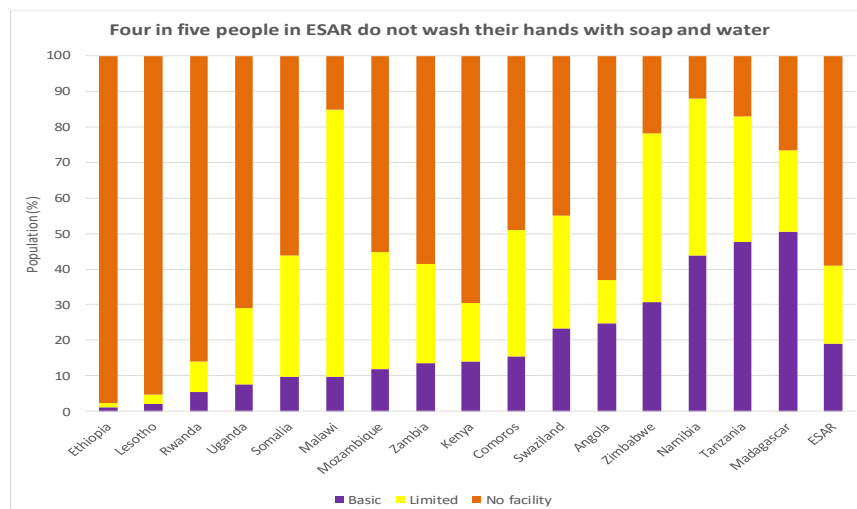
Figure 7: Projections: access to basic sanitation services and open defecation practice in ESAR by 2030



1.2.3 Hygiene services

Data on handwashing facilities with water and soap, the proxy for monitoring basic hygiene, are available for most countries in the region. Data from 17 countries show that just a small proportion of the region's population practises handwashing with soap and water: 19 per cent, ranging from an average of 13 per cent in rural areas to 34 per cent in urban areas. Over 59 per cent of ESAR's population lack access to any handwashing facility, while 22 per cent, though having a facility, had no water and/or soap at the facility at the time of data collection (Figure 8). Countries with highest proportions of population without basic hygiene services are Ethiopia (98 per cent), Lesotho (95 per cent) and Rwanda (86 per cent).

Figure 8: Access to hygiene services in ESAR countries

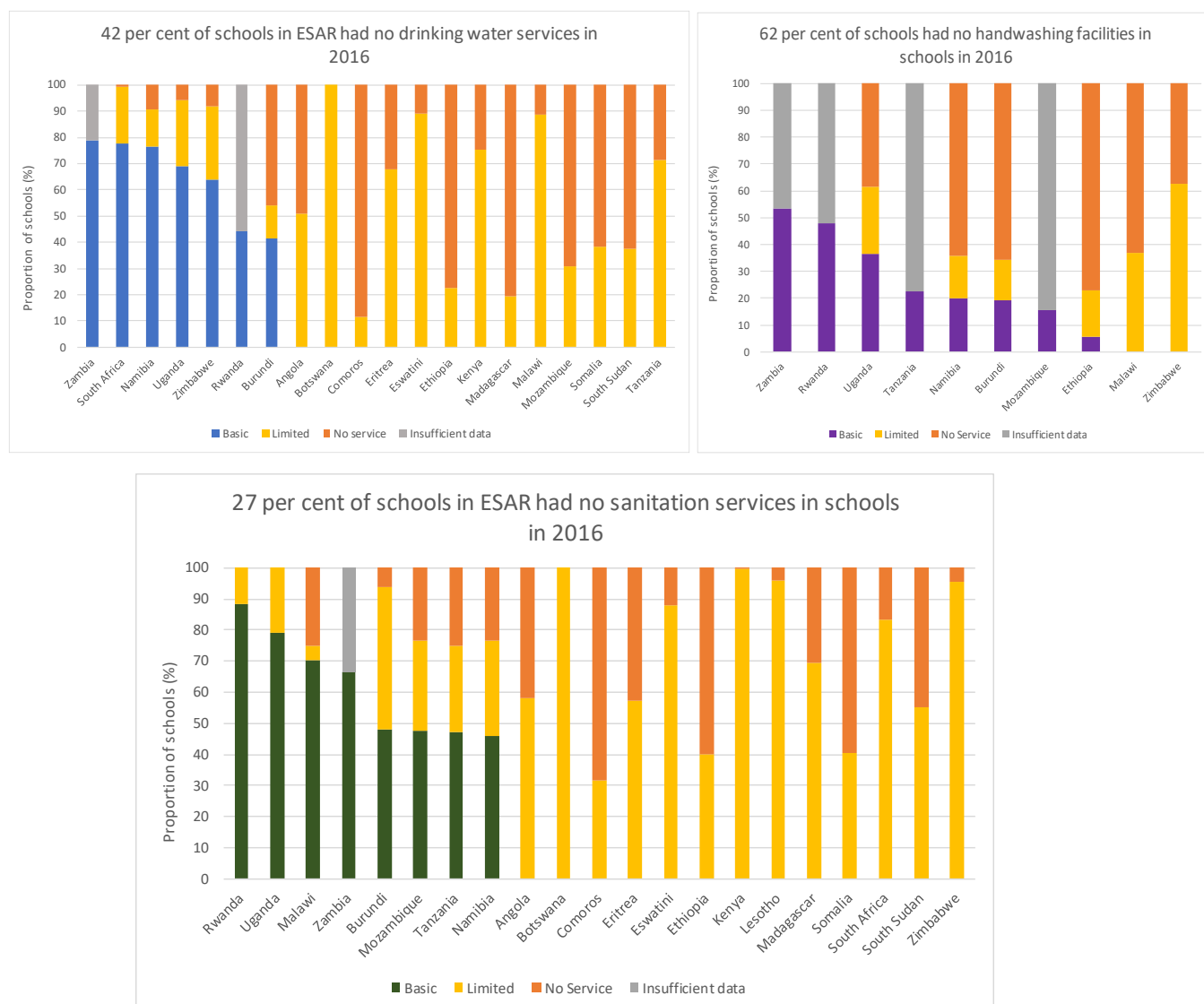


1.2.4 WASH in institutions

WASH in institutions primarily focuses on two programming areas: WASH in Schools (WinS) and WASH in Health Care Facilities (WiHCFs). On World Water Day 2018, the United Nations Secretary General launched the International Decade for Action on Water for Sustainable Development and issued a Call to Action which envisions universal and sustainable access to safe drinking water, sanitation and hygiene in all health care facilities, specifically in low- and middle-income countries where basic services are often lacking. On WinS, the SDGs call on countries to build and upgrade schools that are child, disability and gender-sensitive and equipped with basic drinking water, single-sex basic sanitation and basic handwashing facilities.

In 2018, the WHO/UNICEF Joint Monitoring Programme (JMP) released the first comprehensive global assessment of WinS done in 2016, establishing a baseline for the SDG period. According to JMP global baseline data, in 2016, estimates show that 42 per cent of schools in ESAR had no drinking water services, 27 per cent had no sanitation services and 62 per cent had no hygiene (handwashing) facilities (Figure 9). This means 78 million school-age children in ESAR had no drinking water services in schools, 51 million lacked sanitation services and 117 million had no handwashing facilities in schools.

Figure 9: Access to WASH services in schools in ESAR countries

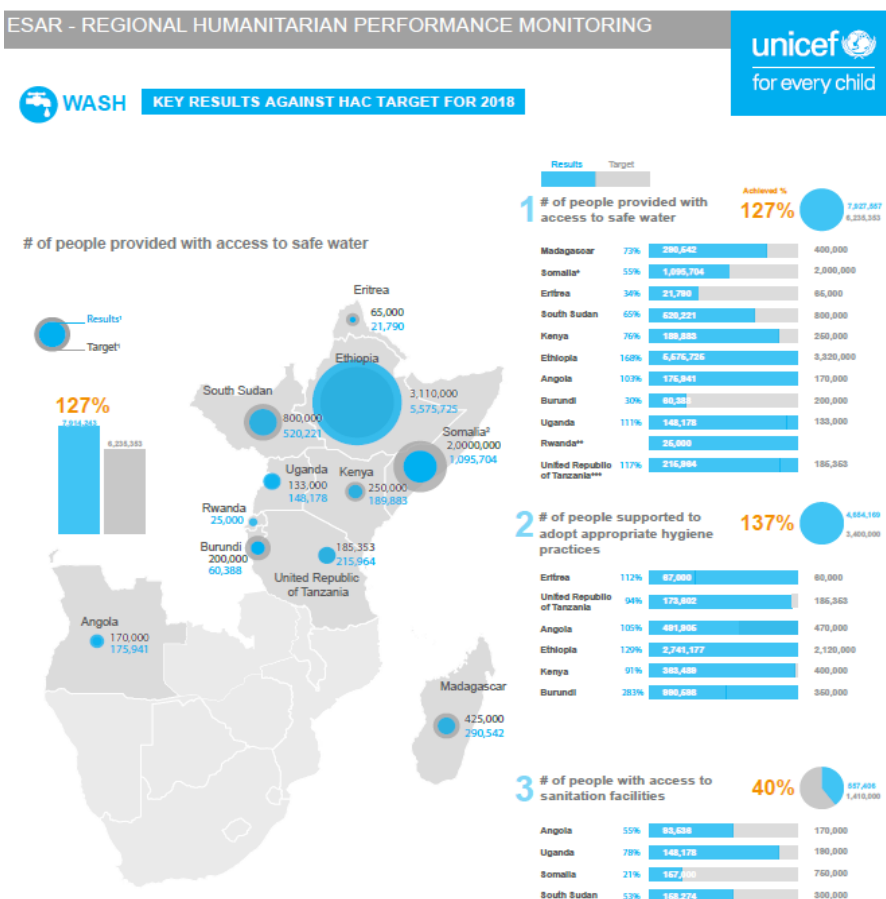


The significant data gaps for hygiene as an indicator underscore the need for stronger monitoring and the integration of the SDG core questions, two of which specifically address hygiene and handwashing, into national data systems including the Education Management Information System, annual school census exercises, Multiple Indicator Cluster Surveys (MICS) and Demographic Health Surveys (DHS). While indicator questions currently exist in most countries for water and sanitation, the lack of institutional mechanisms for collecting and recording hygiene-related data remains a major bottleneck.

1.2.5 WASH in humanitarian settings

In 2018, substantial staff time and resources were dedicated to responding to emergencies including in refugee situations in Angola, Uganda and Zambia; complex emergencies in Somalia and South Sudan; cholera outbreaks in 10 countries; Ebola preparedness in four countries (Burundi, Rwanda, South Sudan and Uganda); and plague preparedness in Madagascar. In the framework of the humanitarian response, 7.9 million people (127 per cent of the Humanitarian Action for Children - HAC - target) were provided with safe water, 1.4 million (40 per cent of the target) with sanitation services and 3.8 million (113 per cent of the target) were reached with key messages on hygiene practices (Figure 10).

Figure 10: ESAR - Regional humanitarian performance monitoring

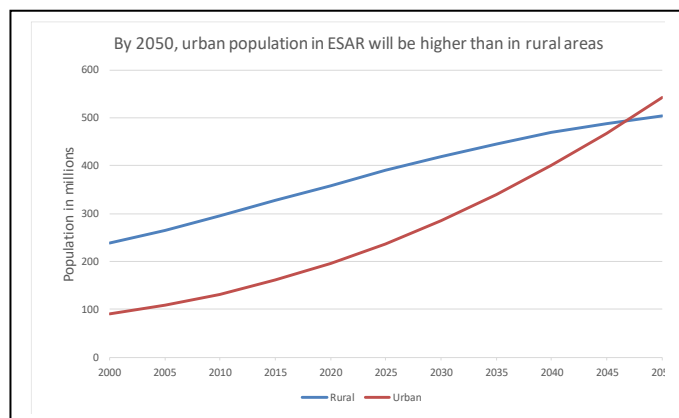


These results were achieved despite a relatively low funding rate with only US\$ 79.8 million mobilized out of a total HAC appeal of US\$ 168 million for WASH. The only indicator that was not achieved was the sanitation one, representative of the relatively low priority given to this sub-sector in humanitarian contexts. In addition, the focus on the provision of temporary access to safe water (water trucking, distribution of household water treatment products), as opposed to permanent access (construction/rehabilitation of water points/systems), can help explain why the water target was achieved despite relatively low funding rates. Going forward, it is critical to prioritize sanitation in emergencies interventions and permanent access to safe water. In addition, considering the 2018 good performance and low cost of temporary access to safe water and hygiene promotion interventions, it would be advisable to set more ambitious targets in 2019 to close the cluster/sector gaps.

1.2.6 Urbanization and WASH programming

There is a shift in demographic patterns in ESAR with urban populations increasing more rapidly than rural ones. By 2050, the population living in urban areas in ESAR will be higher than in rural areas (Figure 11). This needs a response in WASH programming in the region. In its 2016-2030 global WASH Strategy, UNICEF recognizes urban WASH programming as one of its three new areas of emphasis. A greater engagement in urban areas will help ensure that children are reached wherever they are, hence “leaving no one behind” in the efforts to meet SDGs 6.1 and 6.2. Urban areas have vulnerable populations, especially women and children, deprived of basic services, including WASH services.

Figure 11: Changes in urban-rural populations – 2000-2050



Some ESAR countries (Ethiopia, Mozambique and Zimbabwe) have large urban WASH programmes. Other countries (Somalia and South Sudan) are engaged mainly because of internal conflicts. With increasing evidence that urban areas are hotspots for public health epidemics, especially cholera, ESARO will focus more on urban WASH in 2019.

1.2.7 Gender in WASH programming

Lack of access to WASH affects women and children disproportionately, due to both biological and cultural factors. They spend a great deal of time each day queueing for public toilets or seeking secluded spots to defecate, putting them at risk of sexual and other violence. Women are twice as likely as men to fetch water: time that could be put to more productive economic or social uses. In addition to meeting women's specific practical needs, WASH is also essential for their social and economic development, contributing to gender equality and realization of their rights. To achieve these goals, decision makers need to address the persistent inequalities between women and men, embracing the human rights principles of equality and non-discrimination, to ensure universal access to improved water and sanitation services for all everywhere.

In 2018, the WASH Section continued working with the regional gender team and the NYHQ PD team to integrate menstrual hygiene management (MHM) into WASH programming. Overall in ESAR, institutions remain a key point of entry for WASH-related contributions to gender equality and girls' empowerment. UNICEF encourages the construction of private, gender-separated sanitation, handwashing and MHM facilities for girls in schools, while ensuring that national standards are based on gender-aware criteria. In health care facilities, initiatives to improve WASH practices focus on improving the safety and dignity of childbirth. WASH in institutions is also at the forefront of UNICEF efforts to ensure access to WASH for children with disabilities.

Section 2: Programme results

In 2018, the focus of the UNICEF regional WASH team continued to be on providing higher levels of direct technical support and oversight to country offices, resulting in a large number of technical support missions (51 missions in 2018). This led to closer strategic engagement with country offices, resulting in greater technical direction, influence and accountability for WASH programming in the region. The focus was on four principal areas: community and household sanitation and hygiene, water and environment, WASH in institutions and WASH in emergencies.

2.1 Sanitation and hygiene

Sanitation and hygiene programming in 2018 focused mainly on providing technical support to country offices to accelerate access to basic sanitation and hygiene services and moving up the sanitation/hygiene service ladder (including the global open defecation game plan; market shaping; and sustainability).

HIGHLIGHTS

- Support to country offices to eliminate open defecation and move up the sanitation service ladder (Open Defecation Game Plan).
- Sanitation market shaping (with private sector partners including Lixil) and developing of context-specific sanitation market shaping action plans.
- South-South peer learning visit to Kenya on sanitation programming and monitoring systems.

2.1.1 Roll-out of the Open Defecation Game Plan and moving up the sanitation ladder

A major thrust on sanitation programming in 2018 was the roll-out of the Open Defecation Game Plan and supporting countries to move up the sanitation ladder. UNICEF has developed a global game plan for ending open defecation by 2030. The game plan, aligned with SDG 6.2, which also aims to end global open defecation by 2030, seeks to reach 'the furthest behind first', namely the 892 million people who practised open defecation by 2015. ESAR is home to 8 of the 26 'high-burden' countries for open defecation in the world. The game plan outlines UNICEF's programmatic focus and approaches in sanitation over the next four years to 2021. It will help ensure that ending open defecation receives the deliberate and sustained attention required to succeed. To end open defecation, ESARO is targeting these eight countries (Angola, Eritrea, Ethiopia, Kenya, Madagascar, Mozambique, South Sudan and Tanzania) with additional support over the next four years, to accelerate or sustain the annual reduction rates in open defecation.

Furthermore, as part of this initiative, three of these countries (Eritrea, Madagascar and South Sudan) are also being supported to implement a sanitation focused 'Accelerating Sanitation and Water for All' (ASWA) programme, where sustainability issues are emphasized. ESARO is also providing leverage and technical support in the implementation of the UNICEF-Lixil partnership in three other countries (Ethiopia, Kenya and Tanzania).

2.1.2 South-South peer learning on sanitation programming and monitoring systems

UNICEF supported a South-South peer learning visit to Kenya on sanitation programming and monitoring systems in November 2018. This was based on requests from Ethiopia, Mozambique and Rwanda to facilitate the learning visits to Kenya on rural sanitation programming. Delegates visited Kitui County, comprising of 4,930 villages, and declared as open defecation free (ODF). The visit created a forum for UNICEF Kenya/Government of Kenya and the visiting delegations to learn from each other. Lixil, a key partner in UNICEF's efforts to improve sanitation in the region, also participated in the visit. During the four-day visit, Kenya shared experiences and initiatives on rural sanitation and monitoring at national and county levels.

The key areas covered included:

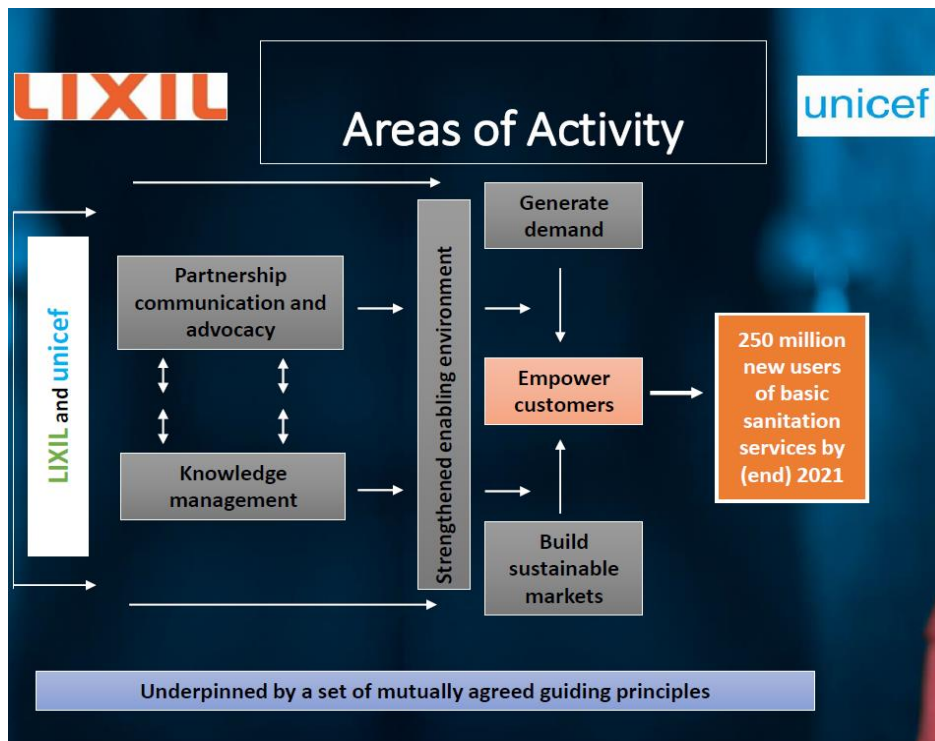
- **Community-led total sanitation (CLTS) real-time monitoring system:** With UNICEF support, the Ministry of Health launched the CLTS real-time monitoring system to strengthen the planning and monitoring of activities and track progress towards ODF certified status in 2017: <http://wash.health.go.ke/clts/index.jsp>. Currently the Sanitation Technical Working Group led by the Ministry is reviewing the system to incorporate additional indicators aligned with the SDG 6.2. A hands-on demonstration was conducted to showcase how the system works, with delegates having the opportunity to test it.
- **SanNut – Toddler WASH:** To contribute to reducing stunting among children under the age of 5, the UNICEF Kenya WASH and Nutrition teams, in partnership with IDInsight, initiated an innovative approach “SanNut”, to integrate key baby and toddler nutrition practices into the CLTS programme. This action research involved training 340 health workers on specific tools for behaviour change communication, and monitoring change in practice in 600 villages in Kitui. The research showed modest but statistically significant improvements in sanitation knowledge, the practice of hand washing after contact with child faeces and correct disposal of child faeces. Presentations were made on the programme at national and local level and visits were made to villages in Kitui where the programme was implemented.
- **Sanitation marketing:** UNICEF Kenya partnered with Lixil to support market shaping to increase the availability of affordable sanitation products and services. UNICEF worked with county governments to create sanitation demand in communities and 800 households purchased and installed new plastic pans developed by Lixil during the market testing phase in Kitui County. Providing information on all available sanitation products to communities is important. When products meet household needs and aspirations, they are willing to pay. Presentations were made on the Lixil-UNICEF programme at national and local level and visits were made to villages in Kitui where the programme was implemented.

2.1.3 Partnerships for sanitation programming at scale

In 2018, ESARO engaged on three key sanitation strategic partnerships.

- **UNICEF-Lixil sanitation market shaping partnership:** ESARO continued to work with the Private Fundraising and Partnerships Division, SD and PD at global level to provide guidance to country offices on how to better engage with the private sector on sanitation and hygiene. The sanitation partnership with Lixil (Figure 12) moved from regional to global level and is now being driven as a global Priority Integrated Partnership. ESARO continues to lead from a technical perspective with high interest from countries in the region. The monitoring framework has been developed; it provides robust information showcasing the progress of the partnership, contributes to transparency and accountability in the partnership and supports analysis of achievements of the partnership goals and objectives.

Figure 12: UNICEF-Lixil sanitation market shaping partnership



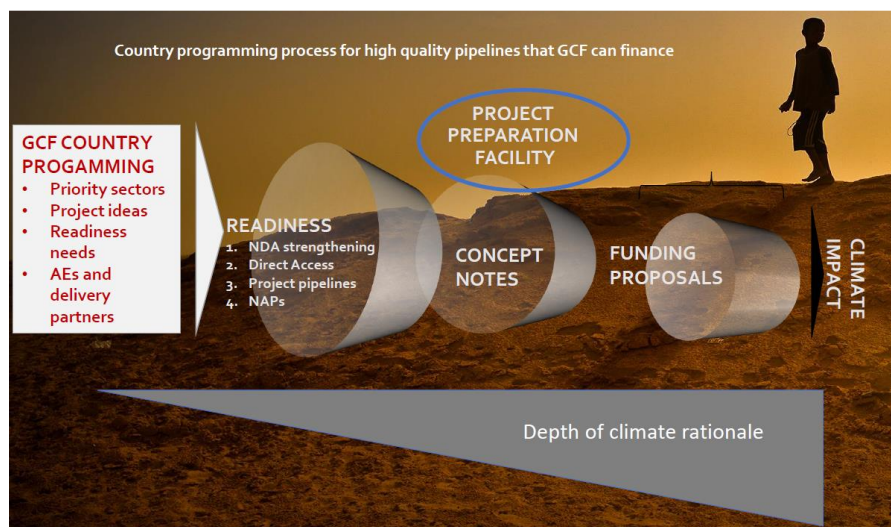
- Mahatma Gandhi International Sanitation Convention:** ESARO provided extensive technical support to COs attending the convention. This four-day international convention held in India in September 2018 brought together ministers and sanitation sector leaders from around the world. The Prime Minister of India, in his address during the convention indicated that India is on track to achieve SDG 6.2 and highlighted the importance of the "4 Ps" in making the world clean: Political Leadership, Public Funding, Partnerships, and People's participation. He said that in India, rural sanitation, which stood at 38 per cent in 2014, has now reached 94 per cent. The UN Secretary General commended India for making the elimination of open defecation a priority at the highest level and congratulated all governments that had agreed plans and allocated budgets to eliminate open defecation.
- Ngor Commitments and AfricaSan5:** In partnership with AMCOW, ESARO provided technical and financial support to the AfricaSan5 sub-regional meeting for East and Southern Africa countries hosted by the Governments of Kenya and South Africa in September 2018. The sub-regional meeting brought together over 50 representatives from government, development partners and civil society from 17 countries in the region. The objectives included i) launching of the Ngor monitoring baseline results and review the process; ii) initiating opportunities for peer learning and knowledge exchange within the region; iii) identifying national planning priorities/milestones; and iv) identifying country learning to be taken forward to the AfricaSan5 thematic sessions. UNICEF ESARO is also a thematic lead in the AfricaSan5 conference planned to be held in Cape Town in February 2019.

2.2 Water and environment

Despite the lack of dedicated human resources in this area, remarkable results were realized in 2018. These include:

- Engagements with the Global Climate Fund (Figure 13) were initiated; efforts to attain UNICEF accreditation for the Green Climate Fund were stepped up and several concept notes developed. This initiative is a potential game changer for climate resilience WASH programming not only in the region, but also globally.

Figure 13: GCF Programming Cycle



- Technical support was provided to improve drinking water programme design in Angola, Ethiopia, Mozambique, South Sudan and Zambia. Similar support was given to Ethiopia, Madagascar and Uganda on solar pumping/carbon offsetting. An assistance mission was also conducted to support the implementation of water networks in the South of Madagascar.
- Technical support was provided to the Anglophone Africa WHO-UNICEF Water Safety Planning Workshop in Rwanda and remote support to the Water Safety planning in Madagascar.
- ESARO ensured climate change was taken into account in SMR processes.

2.3 WASH in humanitarian settings

Key results/achievements in this programming area are presented below:

HIGHLIGHTS

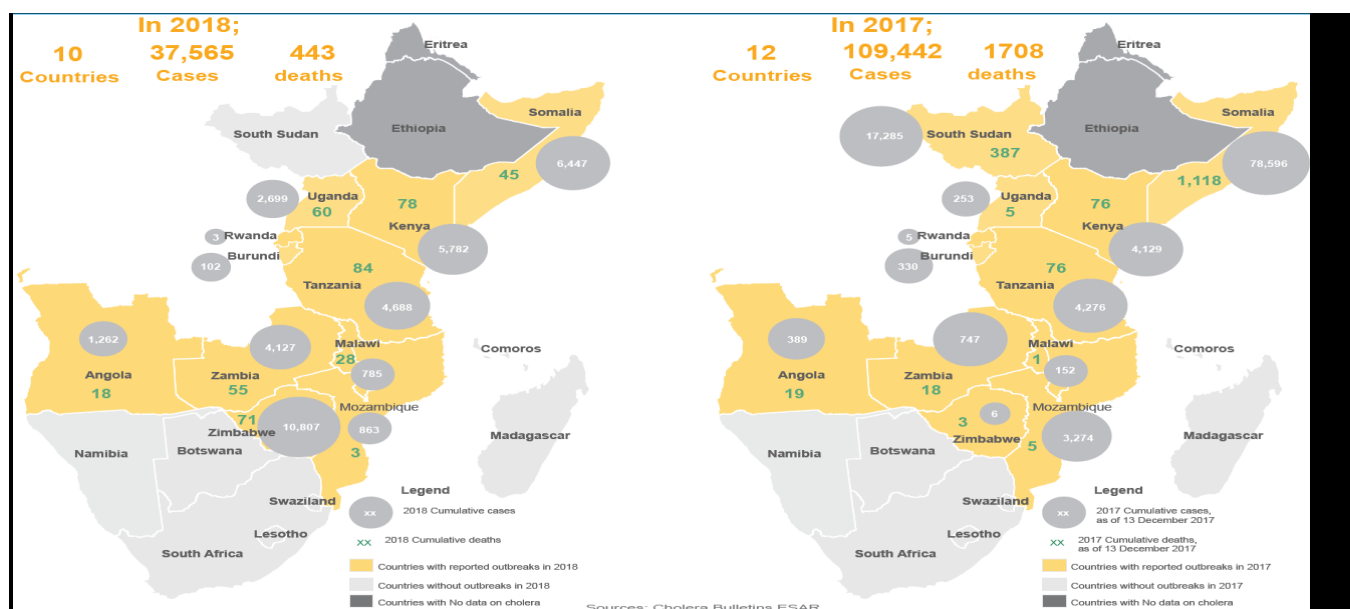
- Implementation of the Regional Cholera Framework in eight countries; 18 bi-weekly cholera bulletins issued; and finalization of a cholera epidemiological study in eight countries.
- Supported the response to cholera outbreaks in five countries (Angola, Kenya, Uganda, Zambia and Zimbabwe) and the organization of a cholera cross-border meeting between South Sudan and Uganda.
- Supported four countries (Burundi, Rwanda, South Sudan and Uganda) with Ebola preparedness and Madagascar with plague preparedness.
- Developed three WASH in emergencies learning series notes.

2.3.1 Cholera

Cholera continues to represent a major public health concern in ESAR; from January to December 2018, approximately 37,565 cases and 443 cholera-related deaths were reported in the region with an average case fatality rate of 1.2 per cent. However, compared to 2017, this represents a 65.7 per cent reduction in the number of cases reported and 74.1 per cent reduction in the number of deaths reported.

Cholera and acute watery diarrhoea (AWD) cases in 2018 emerged from 10 out of the 21 countries in ESAR (Figure 14). The cholera burden in ESAR during the reporting period was markedly heterogeneous, with Zimbabwe accounting for the highest case load at 28.8 per cent (10,807 cases), followed by Somalia reporting 17.2 per cent of cases (6,447 cases). During the same period Kenya was also heavily affected with 15.4 per cent (5,782) of cases registered, Tanzania reported 4,688 cases, Zambia declared 4,127 cases, Uganda recorded 2,699 cases, Angola reported 1,262 cases, Mozambique declared 863 cholera cases, Malawi registered 785 cases, Burundi declared 102 cases and Rwanda 3 cases.

Figure 14: Cholera and AWD outbreaks in ESA in 2017 and 2018



To tackle cholera endemicity, a regional multi-sectoral (WASH, Health, C4D) cholera strategic framework was finalized in March 2017, following cross sectional review and discussions with other key stakeholders such as the Centers for Disease Control and Prevention (CDC), the International Federation of Red Cross and Red Crescent Societies (IFRC), WHO and Oxfam. Implementation of the framework has started and is being done closely with the UNICEF West and Central Africa Region cholera platform, to ensure complementarity of preparedness, response and prevention activities across the continent.

The following was achieved in 2018 as part of the implementation of the framework:

- Finalization of an epidemiological study in eight countries, broadly categorized into the Horn of Africa (Kenya, Somali, South Sudan) and the Zambezi (Angola, Malawi, Mozambique, Zambia and Zimbabwe) basins. The study identified cholera hotspots and transmission pathways in those countries, in an effort to better target cholera preparedness and prevention interventions.

- Launch of a new epidemiological study in three additional countries (Burundi, Tanzania, Uganda) which will also include the elaboration of cholera investment plans in three countries (South Sudan, Tanzania, Uganda).
- Issuance of 18 bi-weekly regional cholera bulletins, which were disseminated widely using various online platforms. A cholera web platform for the region has also been developed and is being updated regularly with cholera-related information.
- Provision of substantive remote and on the ground support for all outbreaks in 2018 by the ESARO cholera team (C4D, health, WASH). On the ground support for response was provided in Angola, Kenya, Uganda, Zambia and Zimbabwe, with a focus on risk assessment, strengthening coordination and monitoring.
- Organization of a cholera cross-border meeting between the Governments of South Sudan and Uganda.
- Contribution to strengthening of Integrated Disease Surveillance and Response systems was ensured through support provided to Tanzania's Ministry of Health to develop a 'Cholera Information Management Action Plan'. Information management inputs were provided to the Tanzania National Multisectoral Plan for cholera.

2.3.2 Ebola preparedness

The Ebola Virus Disease (EVD), has a case fatality rate that varies from 25 to 90 per cent (with an average of 50 per cent). Since 1976, there have been 37 outbreaks in 17 countries, with the Democratic Republic of the Congo (DRC) most affected by the outbreaks.

Two EVD outbreaks, the ninth and tenth in DRC, were reported in 2018. The first one was reported on 8 May in Bikoro Health Zone, Équateur Province (western DRC). It was officially declared over on 24 July 2018 after 54 cases had been reported (38 cases laboratory confirmed and 16 deemed probable) with 33 deaths. The second was reported on 1 August in North Kivu province (eastern DRC). As of 1 January 2019, 608 EVD cases, including 560 confirmed and 48 probable cases had been reported. Following the outbreak declaration, WHO conducted a risk assessment and prioritized countries for preparedness activities. Four countries are classified as Priority 1 (Burundi, Rwanda, South Sudan, Uganda) and four others as Priority 2 (Angola, Central African Republic, Tanzania, Zambia).

Remote support for Ebola preparedness was provided by ESARO to the Priority 1 countries with the review of their preparedness plans and the organization of a WASH in Ebola webinar in early October. In-country missions were also conducted in Uganda and South Sudan to develop tailored WASH and IPC preparedness activities and for on-site mentoring.

2.3.3 Partnership and coordination

In terms of sector coordination, the regional WASH humanitarian group, established in 2016, continued its work with active participation from over 15 organizations: the International Organization for Migration (IOM), the Office of the United Nations High Commissioner for Refugees (UNHCR), Solidarités, World Vision, Norwegian Red Cross, Norwegian Refugee Council, Samaritan's Purse, Oxfam, the Humanitarian Aid department of the European Commission (ECHO), the Office of U.S Foreign Disaster Assistance (OFDA), Médecins sans Frontières (MSF)-Spain, the International Committee of the Red Cross (ICRC), Danish Refugee Council, Save the Children and IFRC. The group is coordinated by UNICEF and focused its work in 2018 on: solar powered water systems, hygiene promotion, WASH in institutions, cholera, market-based approaches, water trucking and marginal water supplies.

2.3.4 Capacity building and knowledge management

- **WASH in emergencies training:** ESAR organized two regional WASH in emergencies trainings (38 participants from 11 countries) and one national training in Somali for 23 NGO/government staff. The purpose of the training was to:
 - Ensure WASH staff understand current operational system options
 - Build confidence to deliver during humanitarian crises
 - Allow a better understanding of the cluster approach, with a focus on both the commitments as Cluster Lead Agency and the considerable potential for UNICEF to contribute as a WASH cluster partner agency.
- **WASH markets training:** A regional training was organized on market-based programming for WASH in collaboration with the Global WASH Cluster. A total of 33 WASH practitioners were trained from 12 organizations. The purpose of the training was to build the capacity of WASH practitioners and sector coordinators to use market-based approaches (including cash transfer) to achieve WASH outcomes.
- **Training on epidemiology and data collection methods for WASH in emergencies:** This training was organized in Johannesburg in collaboration with CDC, the Global WASH Cluster and UNICEF. A total of 25 participants from 13 organizations, including UNICEF, were trained with adequate tools for designing, implementing, monitoring and evaluating WASH emergency responses in some of the disease outbreaks settings commonly found in ESAR e.g. cholera, Ebola, plague, Hepatitis E etc.)
- **WASH in emergencies learning series:** To enhance knowledge sharing, three issues of the WASH in emergencies field notes were published:
 - Simone Klawitter, Corrie Kramer, Samuel Godfrey, Jorge Alvarez–Sala (co-authors). [Improving WASH Service Delivery in Refugee Settings: The Experience of Localization and Professionalization of WASH Services in Ethiopia](#).
 - Simone Klawitter, Jagadishwar Barun, Girma Ejeta (co-authors). [Somalia and South Sudan: Improving Delivery of Humanitarian WASH Supplies During Protracted Crises](#).
 - Simone Klawitter, Kwanayi Meki, Wilberforce Kimezere, Prakash Raj Lamsal (co-authors). [Approaches for Improving WASH Emergency Preparedness and Response: Experience from Zimbabwe and Uganda](#).

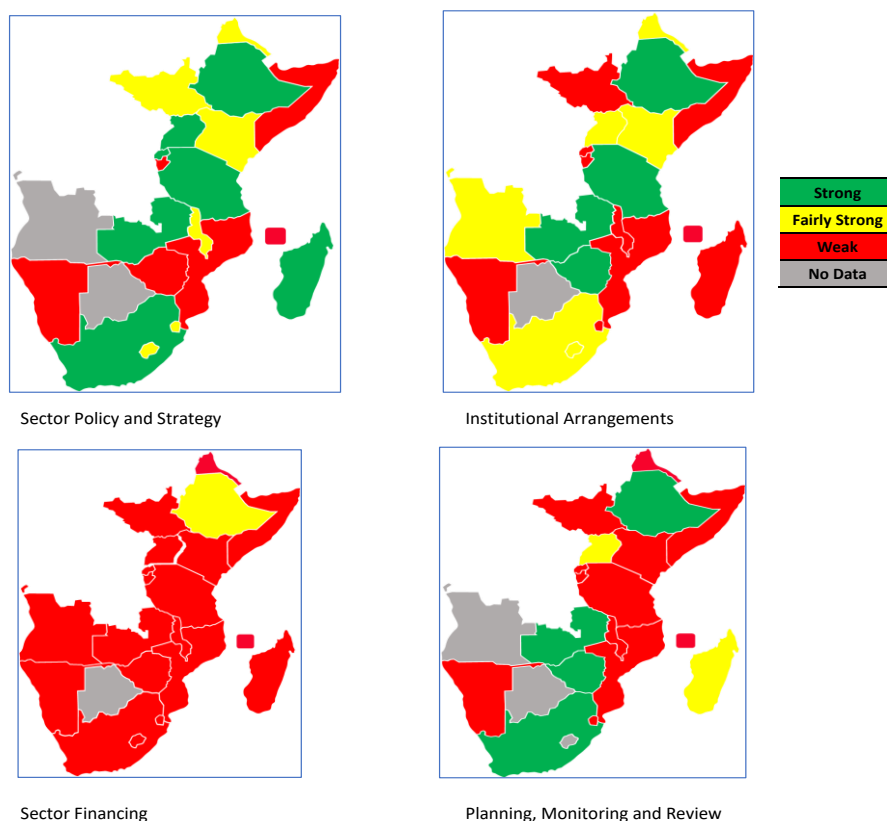
2.4 WASH in institutions

HIGHLIGHTS

- WinS deep dive and regional scoping study
- Support to the establishment of the United Nations Population Fund (UNFPA)-led Africa Coalition on MHM
- Development of WinS and MHM knowledge products including a regional webinar of emerging issues in MHM

In 2018, ESARO conducted a regional scoping study and deep dive into the enabling environment for WinS and related gaps to scale up in the region. Findings showed progress in sector policy and strategy with gaps and weaknesses in the areas of institutional arrangements; sector financing; and planning, monitoring and review (Figure 15).

Figure 15: Country performance on WinS in ESAR based on enabling environment building blocks



Over 50 per cent of countries in the region have a validated WinS policy under implementation and an additional 24 per cent have drafted policies under review for adoption. This indicates that most countries in the region acknowledge the need for, and have recently taken concrete action towards, developing national policies and standards for WinS. Rigorous monitoring, sustainable operations and maintenance and consistent sector financing, however, remain major bottlenecks to effective, long-term implementation.

Comoros was facing challenges in terms of WASH coverage and enabling environment indicators and therefore received targeted support through year-round remote assistance, a mid-year technical assistance mission addressing institutional WASH, the development of draft theory of change and investment case and by funding a three-month stretch assignment. Outcomes of the stretch assignment include finalization of the theory of change, a roadmap for WinS scale-up at national level and sustained government engagement.

The regional WASH team will continue to support countries in the region, specifically prioritizing those with weak enabling environments to ensure that their internal systems and structures are strengthened for at scale programming for WASH in schools. Plans include supporting technical assistance to countries for the development of theories of change and investment cases specifically addressing WASH in schools.

ESARO provided inputs to UNICEF's global response to the United Nations Secretary General's Call to Action on WASH and supported the joint UNICEF/Emory University WinHCFs pilot training for WASH and health care practitioners in Tanzania.

On MHM, the WASH team worked closely with Gender colleagues to organize a regional webinar on emerging trends within the region, and provided technical inputs on the UNICEF regional position on the establishment of the UNFPA-led Africa Coalition for Menstrual Hygiene Management (ACMHM). UNICEF will continue to play a critical role in the WASH and Waste Disposal Task Force of the newly formed continental coordinating platform, providing strategic guidance on the activities and plans of the ACMHM.

2.5 Strengthening enabling environment for WASH programming in ESAR

In ESAR, several obstacles have been identified to achieving SDG 6, including low priority on the political agenda; inadequate development and implementation of comprehensive national plans; unpredictable and insufficient financing that does not reach the most needy populations; limited reliable evidence, data or analysis to inform decision-making and challenges in tracking progress; and low levels of mutual accountability between developing countries and donors, and between developing country governments and their citizens.

To address these obstacles, there is a need to strengthen the WASH enabling environment within countries where WASH interventions are most needed. An enabling environment is a set of interrelated sector functions that facilitate engagement among governments and public and private partners to sustain an effective WASH service delivery development process. In the context of UNICEF's work, an enabling environment for WASH is one that creates the conditions for a country to have sustainable, at-scale WASH services that facilitate the achievement of SDG 6, which calls for universal access of WASH services for all, with a progressive reduction in inequality.

ESARO continued to provide support to assess WASH programming bottlenecks using the WASH Bottleneck Analysis Tool. In 2018, support was extended to South Sudan and Eritrea.

In collaboration with the Sanitation and Water for All (SWA) Secretariat, ESARO agreed to hold a multi-country workshop on “*Strengthening the Enabling Environment for Achieving WASH SDG Targets*” in Eswatini. The workshop aimed to provide technical assistance to strengthen the enabling environment for achieving the WASH SDG targets in Comoros, Lesotho, Namibia and Eswatini. The forum was attended by over 50 participants from the four countries, PD NYHQ, SWA Secretariat and ESARO. Most participants were technical staff actively involved in sector-wide approaches including policy formulation and financing. The key areas covered included:

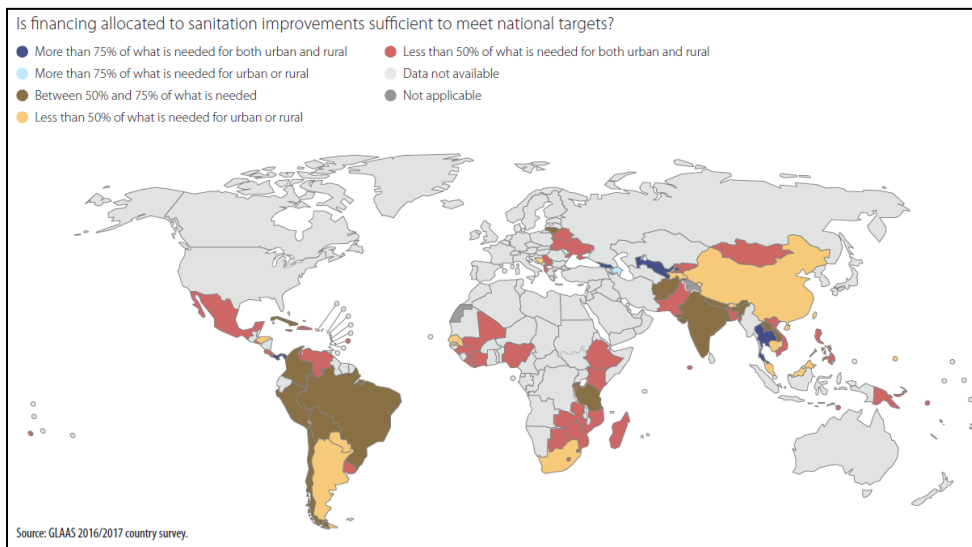
- **WASH SDGs and implications for countries:** The objective of the session was to develop a common understanding on the WASH SDG targets and implications for countries. Key SDG terminologies and definitions were presented – service ladders, indicators and targets. The session also provided a data overview of the WASH status in the region with a specific focus on the four countries represented. This was followed by interactive discussions in groups and thereafter, a plenary on the implications of WASH SDGs.
- **Responding to the SDG challenge – is the enabling environment fit-for-purpose?** The objective of the session was to develop a common understanding on how strengthening the WASH enabling environment can contribute to the achievement of SDGs, including WASH and other related ones. The session highlighted implications of the SDGs for the enabling environment, the key transitions countries need to make to strengthen their sectors, and tools and resources that can help strengthen the enabling environment (Figure 16)

Figure 16: Enabling environment diagnostic tools

Comprehensive readiness of the enabling environment for the SDGs		
Diagnostic tools		
What is the goal ?	SDGs – universal access, eliminate inequalities, improve sustainable	SDGs indicators New service ladders Updated baseline
What is needed for a well-functioning sector?	Building blocks - key elements of a sector capable of delivering sustainable services and progressively eliminate inequalities in access	Sector diagnostics tools including WASH BAT, GLAAS, CSOs, MAPAS
How to bring about change?	Improve Collaborative Behaviours - the ways of working through which– if jointly adopted will strengthen country capacity to deliver and sustain services to all	SWA Collaborative Behaviours Country Profiles

- **Financing the WASH SDGs:** The objective was to share information on the financing requirements for the SDGs and allow participants to reflect on their countries' needs and processes to meet the financing goals of the SDGs. Presentations were made on the overall sector financing needs and funding gaps and policy trade-offs on financing the SDGs. This was followed by an interactive panel and group discussion on various options to close the funding gap. One of the main points raised was that in ESAR there are insufficient financial resources allocated to sanitation to meet national targets (Figure 17).

Figure 17: Sufficiency of financing allocated for sanitation



- **Monitoring WASH SDG targets:** The objective of this session was to create understanding on the indicators to track SDG targets and how they can be effectively monitored. Discussions were held on how to track SDG WASH indicators and strengthen platforms for mutual accountability, including on how the updated SWA accountability mechanism will contribute to sector progress.

- ***Mobilizing the necessary political support and strengthening advocacy platforms for the WASH SDGs:*** The objective of this session was for participants to understand how to mobilize political support and strengthen advocacy platforms to accelerate achievement of WASH SDGs. Issues related to creating joint advocacy strategies to raise political attention towards strengthening the enabling environment were shared and discussed. The main points raised were:
 - Achieving the SDGs will require actions of leaders at various levels, including political leaders.
 - WASH sector actors should identify the policy issues on which they want to advocate, develop a clear plan of action involving major stakeholders and identify the evidence they need to make convincing arguments.
 - Advocacy can be done in a systematic manner if actors work together to identify the factors hindering progress, formulate solutions together and use strategic opportunities to raise the visibility of the sector.
 - There are opportunities to mutually reinforce advocacy through the national, regional and global platforms including those offered by AMCOW and SWA.
- ***Key action points and road maps:*** Each country and organization then developed the next steps in strengthening enabling environment for WASH in their countries.

2.6 Resource mobilization, oversight and management

2.6.1 Resource mobilization

Support was provided to many country offices, with good success rates, including support from the Netherlands under the ASWA programme for Tanzania, Somalia and Mozambique; from the United Kingdom for Phase II of the ASWA programme for Eritrea, South Sudan and Madagascar; Youth Engagement in WASH programme funds from the Office of the Executive Director for Somalia, Ethiopia and South Sudan; Korea International Cooperation Agency (KOICA) for Tanzania for a cholera proposal and US Fund for UNICEF for Burundi. In addition, discussions for funding have been initiated with the Global Climate Fund and the European Investment Bank.

2.6.2 Quality assurance and oversight

To strengthen country office WASH programming in 2018, ESARO provided oversight and quality assurance for the region's 19 WASH programming countries, through support for WASH programme planning and review processes (such as country programme documents, SMR, strategy notes, mid-term reviews, annual reports, work plans, annual management plans and sector reviews). ESARO also supported effective programming through involvement in recruitment of senior WASH staff and the WASH Regional Adviser held regular bilateral calls with country office Chiefs of WASH. Quality assurance and oversight was addressed online and during technical missions and meetings.

Fifty-one country support technical missions were conducted and 51 meetings held to support countries in 2018. ESARO conducted an annual satisfaction survey, completed by ESAR country offices, with respect to Regional Office performance. The results showed that the technical support provided by ESARO was highly appreciated, with some areas such as information on staff vacancies, fundraising and increasing staffing at ESARO to adequately respond to country office requests identified as needing some improvement.

2.6.3 Internal management

The regional WASH team continued with day-to-day internal management activities to ensure effective running of the section. Activities conducted in 2018 include:

- Internal budget management, donor reporting, human resources and programmes, in accordance with global and regional office standards and benchmarks.
- Fund monitoring to ensure maximum utilization.
- Contributing to donor reports and monthly grants reports, as required.
- Liaising with the planning section for grant allocations/mapping and allocation ceiling tracker for country offices and the WASH section.
- Coordinating travel for WASH staff in the region and for NYHQ consultants.
- Maintaining and updating reporting modules, attendance records, cash forecasts, the communication tree, travel/leave plans, calendar and consultant databases.
- Processing requisitions, payments and invoices in alignment with UNICEF policies.

In 2018 the staffing capacity increased, with an additional Junior Professional Officer (JPO). Overall staffing thus comprised of a WASH adviser; four technical specialists i.e. three fixed term appointments (for emergency, sanitation and hygiene, and knowledge management), and one temporary appointment (emergency); a JPO and a programme associate. There were two changes in personnel in the year: the Regional Adviser and the Sanitation and Hygiene Specialist.

2.7. Overall results assessment

The overall assessment of progress in 2018 is positive. Progress was made across all WASH programming areas. There was increased focus on technical assistance to country offices in humanitarian and development contexts, particularly those with capacity needs. All 10 deliverables in the work plan were met. Progress assessment on results targets, as outlined in the ROMP 2018–2021, was also largely positive (see Table 1).

The year 2018 was the start of the new ROMP, and ESARO WASH set new targets. Therefore, only baseline and progress as per December 2018 are indicated.

Table 1: Results assessment

Indicator	Baseline	Target	Progress
	January 2018	December 2018	December 2018
Number of synergistic models and guidance notes articulated / developed in support of emergency and non-emergency programming in WASH	1	2	2
Number of partnerships created to support ESAR WASH priorities	1	2	2
Number of countries implementing at scale synergistic models with government and partners contributing to Regional Priority 1-3	0	2	4
Number of countries incorporating climate-resilience principles and approaches into national WASH policies, strategies and plans	0	1	3
Number of high priority countries implementing the ESAR cholera strategic framework	0	10	9
Number of countries implementing drinking water service management-, financing/budgeting- and monitoring models	0	2	2
Number of country offices that have made strategic shifts in WASH programming (MTR/Country programme Document)	2	2	3

2.8 Key constraints, lessons and good practices

Key constraints:

- Changing WASH funding landscape in the region resulting in low and slow funding pipelines and changing priorities of bilateral donors.
- Limited UNICEF and national capacities in systems strengthening, financing, resilience and climate change.
- Data gaps - insufficient disaggregated data by sub-sector and levels.
- Lack of robust, real time monitoring systems for WASH.
- Insufficient evaluation evidence on WASH in emergencies.

Key lessons and good practices:

- Development of WASH sector national plans and roadmaps aligned to WASH SDGs.
- Innovative Financing Options: Public Private Partnerships; Blended Financing; South-South Financing; Domestic Commercial Financing; Guarantees; Domestic Financing – Taxes, Tariffs and Transfers.
- Increasing interest from non-traditional donors for WASH programming in UNICEF like KfW, European Investment Bank, Global Climate Fund.
- Need to improve WASH emergency preparedness in urban contexts (example Lusaka and Harare urban cholera outbreaks).
- Investing time in co-creation to determine the precise nature of the partnerships.

Section 3: Financial report

To implement the ESARO WASH Rolling Work Plan, it is important to stress the need for predictable flexible funding for development and emergency programme delivery.

Table 2: 2018 Planned budget by Thematic Sector - WASH (in US\$)

Intermediate Results	Funding Type	Planned Budget ²
Global – Water Sanitation and Hygiene	ORR	937,382.39
	ORE	158,518.43
Total		1,095,900.82

Table 3: Thematic contributions received for thematic pool 6 by UNICEF ESARO in 2018 (in US\$)

Donors	Grant Number	Contribution Amount	Programmable Amount
Global Thematic Funds	SC189903	1,070,000	1,000,000
Polish National Committee	SC1499030119	124,390	118,468
Total		1,194,390	1,118,468

² Planned budget excludes estimated recovery cost.

Table 4: 2018 Expenditures by Key Results Areas (in US\$)

	Expense
Other Resources – Emergency (ORE)	169,926
24-01 Water	169,926
Other Resources – Regular (ORR)	1,089,777
24-01 Water	1,057,737
24-02 Sanitation	32,039
Grand Total	1,259,703*

* Expenditures incurred include carry-over funds from 2017

Table 5: 2018 Thematic expenses by Results Areas (in US\$)

Organizational Targets	Expenditure Amount			
	ORE	ORR	RR	All Programme Accounts
24-01 Water	73,517	700,773		774,290
24-02 Sanitation		35,193		35,193
Total	73,517	735,966		809,482

Table 6: 2018 Expenses by Specific Intervention Codes (in US\$)

Specific Intervention Code	Expenditure
Other Resources - Emergency	
24-01-09 Water supply in emergencies - improving water supply services communities	6,254
24-01-99 Technical assistance - Water	163,672
Other Resources - Regular	
24-01-01 WASH - Enabling environment	91,651
24-01-02 Water - climate resilience and environmental sustainability	1,762
24-01-03 WASH - risk informed programming incl. climate resilience disaster/conflict	49,900
24-01-05 Water supply - institutions (schools, health care facilities, ECD centres)	22,202
24-01-09 Water supply in emergencies - improving water supply services communities	45,945
24-01-99 Technical assistance - Water	846,276
24-02-08 Sanitation and hygiene - institutions (schools, health care facilities, ECD centers) including menstrual hygiene management	9,887
24-02-11 WASH humanitarian cluster/humanitarian sector coordination	8,395
24-02-99 Technical assistance - Sanitation	13,758
Total	1,259,703*

* Expenditures incurred include carry-over funds from 2017

Table 7: Planned budget and available resources for 2019

Intermediate Results	Planned Budget	Funded Budget	Gap
Global – Water Sanitation and Hygiene	2,165,220	1,881,746	283,474
Total	2,165,220	1,881,746	283,474

SECTION 4: Future work plan

Moving into 2019, ESARO will continue working on its core areas of accountability (WASH in communities, WASH in health care facilities and WASH in schools) and responsibility (urbanization, climate change, cross-sectoral programming, systems strengthening, humanitarian action) as stipulated in the 2018-2021 ROMP and broadly contributing to UNICEF's Goal Area 4: Every child lives in a clean and safe environment, as outlined in UNICEF's 2018-2021 Strategic Plan. This is well aligned to achieving SDGs 6.1 and 6.2.

The regional WASH team will continue delivering results for children under 10 activities: partnerships and resource mobilization; guidance and evidence generation; strengthening enabling environments for WASH programming; increasing access to climate resilient basic drinking water services; accelerating access to sanitation and hygiene services and ending open defecation; strengthening programming on WinS and WiHCFs; humanitarian WASH – both health and non-health related (droughts, refugees etc); quality assurance and oversight for WASH programmes in the region; and internal management. Key areas of emphasis in 2019 will be:

- Addressing the sanitation gaps by localizing the global open defecation game plan, increased support to country offices to implement the expanded ASWA programmes and the UNICEF-Lixil partnership. A study has been initiated to address the knowledge gaps in sanitation programming in fragile contexts.
- Addressing programmatic shifts related to urbanization and climate, by strengthening climate resilient WASH programming in the region. A dedicated staff will report in Q2 2019 to lead programming in this area.
- Broadening the funding scope by increasing engagement with non-traditional donors, the private sector and domestic financing. ESARO has commissioned a study on WASH financing in the region and is engaging financing partners to increase resources for WASH programming.
- Strengthening national monitoring and data systems and aligning them to the SDGs.
- Scaling up WASH programming in schools (based on deep dive study done in 2018) and in health care facilities.
- Continued implementation of the Regional Cholera Framework aimed at eliminating cholera in the region, with expanded cholera epidemiological studies and elaboration of national cholera prevention investment plans for identified hotspots.

Funding for all existing core posts in 2019, mostly drawn from thematic funds, is ensured and a supply plan has been approved. However, owing to the growing emphasis on WASH in institutions, extra capacity will be required for this programming area. Increased allocations of thematic funds to ESAR will be required to fund all existing posts for technical specialists (US\$ 1,155,000 per year from 2020).

Expression of Thanks

ESARO would like to express its sincere appreciation to donors for their contributions to the global WASH thematic fund, especially the Polish National Committee. These contributions are particularly valued as they are flexible and enable ESARO to play a critical role in strengthening country office WASH programmes in a way that best responds to national needs and requirements. This funding ensures that UNICEF's programming for WASH is both equity- and results-oriented.

Annex 1: Stories of WASH impact in the region

The following list of articles captures the impact of UNICEF's WASH work in the region. Click the links for more information.

- An inspiring story from Zambia of how to practice good hygiene even in challenging contexts like refugee camps. https://www.unicef.org/esaro/5440_21683.html
- Innovative story on how Ethiopians are chasing water from space. https://www.unicef.org/esaro/5440_21366.html
- An inspiring story on how access to safe water is saving lives in Burundi. https://www.unicef.org/esaro/5440_21416.html
- Captivating story showing the use of solar power for water systems in South Sudan for communities off the grid. https://www.unicef.org/esaro/5440_south-sudan-2018-off-grid-communities-turn-solar-power-clean-water.html
- A story from Malawi, showing how solar power is keeping water flowing. https://www.unicef.org/esaro/5440_mlw2018_solar-power.html
- A call to action story showing refugee hosting districts in Uganda still lack basic services like water, sanitation and shelter. https://www.unicef.org/esaro/5440_21643.html
- A story from Somalia showing water as a lifeline for urban dwellers. https://www.unicef.org/esaro/5440_21279.html
- Inspiring story from South Sudan on how enabling access to safe drinking water pulls entire villages out of distress. https://www.unicef.org/esaro/5440_21491.html
- A captivating story showing how water delivery in schools in Namibia has brought relief to learners. https://www.unicef.org/esaro/5440_21370.html

Annex 2: Report feedback form

UNICEF is working to improve the quality of reporting and would highly appreciate your feedback. Kindly provide your feedback for this report through the following [link](#).