

Water, Sanitation, and Hygiene Sector Update

HIGHLIGHTS OF FISCAL YEAR (FY) 2014 ACTIVITIES | OCTOBER 2014

SECTOR OVERVIEW

Water, sanitation, and hygiene (WASH) programs represent vital components of USAID Office of U.S. Foreign Disaster Assistance (USAID/OFDA) responses to rapid-onset disasters and complex emergencies, as disaster-affected populations are more susceptible to illness and death from waterborne and communicable diseases. WASH interventions in emergencies often include promotion of good hygienic practices, construction or repair of latrines, removal of solid waste, and provision of safe, treated water. Activities such as building latrines and establishing waste removal systems can prove even more challenging in areas with high water tables, hard rock sites, and dense populations.

In FY 2014, USAID/OFDA provided more than \$137 million for WASH programs in 27 countries. USAID/OFDA also links emergency WASH activities with transition and development programs funded by other USAID offices and incorporates institutional partners—such as local governments—in program planning and implementation to promote the sustainability of water and hygiene-focused projects.

HARNESSING THE SUN TO STRENGTHEN WATER SUPPLIES IN SUDAN



A community in Darfur collects water from a solar-driven water system. (Courtesy of World Relief)

Inadequate sanitation perpetuates the cycle of disease and health problems that affect the world's poorest people—a pattern exacerbated during humanitarian emergencies. In Sudan, vulnerable families continue to cope with the effects of conflict, economic shocks, and perennial environmental hazards, such as drought and flooding. Since 2003, the complex emergency in the Darfur region has affected more than 4.7 million people, including more than 2.4 million people displaced in Darfur—more than 1.2 million of whom are long-term internally displaced persons (IDPs) who remain in camps and rely on external assistance for water and sanitation services, according to U.N. agencies. Safe water systems in these camps are powered by large generators and require sizable quantities of expensive diesel fuel. In addition to incurring extremely high running costs and requiring numerous repairs and maintenance, the reliance on an erratic and unreliable supply of diesel fuel creates water insecurity in these camps on a regular basis.

In order to reduce expensive running costs and, more importantly, to ensure a reliable supply of safe drinking water, USAID/OFDA is supporting three non-governmental organization (NGO) partners to convert fuel-powered systems to solar-powered water pumping systems in IDP camps in Darfur. USAID/OFDA believes that these systems will require less maintenance and repairs in the long-term, along with providing safe water at a much lower cost. Through the funding of service contracts with local suppliers and mechanics, USAID/OFDA is strengthening linkages to the private sector in order to create long-term sustainability in the operation and maintenance of the systems. The performance of these systems is monitored by partners on a daily basis in order to compare their performance and reliability to that of traditional generator-powered systems.

RESTORING WASH INFRASTRUCTURE IN THE PHILIPPINES



USAID/OFDA helped restore water systems in the Philippines as residents worked to clear damaged and destroyed structures. (Photo by Melissa Opryszko/USAID)

On November 8, 2013, Typhoon Yolanda/Haiyan made landfall in the central Philippines, resulting in 6,300 deaths, damaging or destroying 1.1 million houses, and affecting approximately 16 million people. In Tacloban City and surrounding communities, the typhoon caused significant damage to the public water system, resulting in minimal availability of potable water. Groundwater supplies were also contaminated in most storm-affected communities, while regions without electricity faced crippled water treatment systems.

Immediately following the typhoon, USAID/OFDA partnered with multiple organizations to support the repair and reconstruction of the municipal water treatment and distribution system in Tacloban City. USAID/OFDA also supported organizations to establish WASH interventions, including the distribution of point-of-use water treatment solutions, installation of mobile

water treatment units, and set-up of communal water points, at collective centers hosting displaced families. In addition, USAID/OFDA facilitated close collaboration between the Government of the Philippines Department of Social Welfare and Development and the U.S. Department of Defense to enable the immediate distribution of USAID/OFDA-provided WASH commodities, including hygiene kits, to affected populations. As response activities shifted from emergency to recovery, USAID/OFDA funded projects that integrated WASH interventions with shelter repair and reconstruction, focusing particularly on incorporating household sanitation rehabilitation.

IMPROVING WATER AND SANITATION FOR DISPLACED IN IRAQ

Between January and August 2014, insecurity in Iraq displaced approximately 1.7 million people, according to the U.N. Many IDP families lack access to safe drinking water due to destroyed infrastructure, limited electricity supplies, and insufficient infrastructure in areas hosting displaced households. As a result, ensuring access to life-saving WASH services is critical to this population. However, the provision of WASH assistance in country like Iraq, where many of these services are provided by both municipal authorities and private vendors, requires a nuanced emergency response.

With these circumstances in mind, USAID/OFDA is funding partners to work with municipal authorities to strengthen their existing water and sanitation networks in order to support the higher demand on systems due to the influx of IDPs. In parallel, USAID/OFDA is also supporting WASH partners to conduct an Emergency Market Mapping & Analysis (EMMA), in order to assess the capacity of private WASH service providers. Partners will use the EMMA findings to engage the services of private providers in the emergency response to more efficiently deliver aid, provide beneficiaries with greater choice of hygiene items, and support local markets.

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