

SCALING UP FINANCING FOR WASH

An opportunity for investment for increased socio-economic outcomes

A CASE FOR INVESTING IN THE WASH SECTOR

This briefing note, intended for the Sierra Leone Ministry of Finance, sets out the case for increased investments in water supply and sanitation and higher prioritization for the sector when budget allocation decisions are made. The need for water and sanitation is fundamental to all citizens, and increased coverage of these essential services will significantly contribute to population welfare as well as the wealth and stability of Sierra Leone.

WHY INVEST IN WASH

Sierra Leone has one of the lowest rates of access to improved water and sanitation in the region and is heavily reliant on donor finance.

Still recovering from decades of conflict, there are significant capacity and coordination challenges that have impeded progress in WASH, compounded in the context of decentralization of government functions to provincial and district levels.

The sanitation and hygiene situation is particularly urgent, reflected in health statistics with Sierra Leone's infant mortality rate and WASH - related causes - adjusted life years amongst the lowest in sub-Saharan Africa. At current rates of progress, it is now very obvious that the sanitation MDG will not be met. Significant investment and efforts are required to increase coverage.

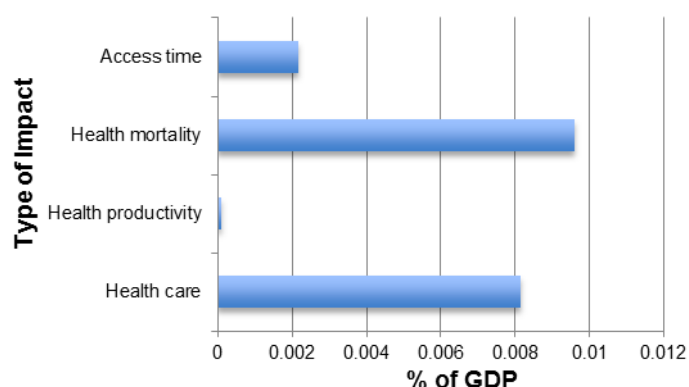


Figure 1: Cost, as a proportion of Liberia's annual GDP, of not investing in improved sanitation, by impact – illustrative example for Sierra Leone

CONTEXT ANALYSIS – A CALL FOR FULFILING PROMISES

Sierra Leone has one of the highest under-5 mortality rates in the world and water borne diseases, cholera and EVD has affected many in the 2012 and 2014 outbreak. Inadequate access to safe water and sanitation services affects poor school attendance and performance (particularly among girls) and safety and security of women and girls. Water and sanitation-related infections and poor hygiene practices during and after delivery affect the health of mothers and babies and even the marginalized communities.

Looking at the WASH situation of Sierra Leone, there are needs for more funds in order to meet improved WASH standards and service delivery. Based on WHO estimates, the annual economic cost of the prevailing low levels of access to water and sanitation could be a significant 2% of GDP per annum. In 2008, the Government of Sierra Leone further committed in the eThekwini declaration to spend at least 0.5% of its GDP on sanitation by 2015 this year.

2016 therefore presents a unique opportunity for Sierra Leone especially as the Sustainable Development Goals have finally been adopted by United Nations member states. This therefore suggests evidenced based decision making in the sector and at the same time

improving on capacity strengthening.

In 2012 the Government raised this commitment to 1% the share of GDP by 2015. 2012 the Government raised this commitment to 1% the share of GDP by 2015.

In another commitment, the SWA is a partnership of governments, donors, civil society and multilateral organizations. Its aim is to ensure that all people have access to basic sanitation and safe drinking water. It is particularly concerned with those countries where the needs are greatest.

Sierra Leone clearly indicates that the needs for water and sanitation are great. Therefore, the Sierra Leone government's commitment to the provision of sanitation and water is articulated around the following:

Prioritization of WASH in national agenda; Improved capacity for coordination and harmonization of the delivery approaches of state, non-state actors and Development Partners; Develop the necessary legal and regulatory framework, and the institutional and organizational arrangements to support water resources management, drinking water supply and sanitation; Develop and operationalize WASH Sector investment plans; Increase capacity for M&E data collection, analysis and feedback to improve sector wide information and decision making; and Enhancing Domestic Resource Allocation to WASH – with focus on integrating WASH into the planning and budgeting cycle with a clear focus on each of the three components of WASH (Water, Sanitation and Hygiene); Increase direct and targeted allocation for Sanitation and hygiene out of domestic revenues.

CURRENT COVERAGE

Coverage and WASH related health statistics According to WHO/UNICEF Joint Monitoring Program (JMP) data the proportion of the Sierra Leonean population with access to improved water is 74% with great disparities in rural and urban accessibility.

Sanitation coverage in Sierra Leone is amongst the worst in the region, with only 13% of people have access to adequate sanitation (38% urban and 6% rural).

RECOMMENDATIONS:

We therefore request government to:

- **Have a separate sanitation budget line:** government should set up the Sanitation Directorate and have a separate sanitation budget line to increase the importance and visibility of sanitation needs.
- **Disburse funds on time:** by overhauling the financial management system and overcoming one of major barriers to WASH development affecting Ministries and councils.
- **Increase recurrent funds:** to allow increased investment to hygiene promotion, community mobilization, post-construction support, monitoring of programs and sustain WASH service delivery at local and national level.
- **Strengthen Local Councils:** to improve district capacity to plan and deliver WASH activities as intended in the Local Government Act.

CONCLUSION:

WASH-Net believes that when these commitments are fully met and sector financing increased to address the emerging WASH needs, we can all together be able to turn lives around for millions of Sierra Leoneans who do not have a safe place to call a toilet and that in the same direction will reverse the trend of babies dying from water related illnesses such as diarrhoea, cholera and of course, greater and robust health sector performance nationwide.

Country, area or territory	Year	Population (x1,000)	Percentage urban population	Use of sanitation facilities (percentage of population) ^{1,2}												Progress towards MDG target ³	Proportion of the 2015 population that gained access since 1990 (%)
				Urban				Rural				Total					
				Unimproved				Unimproved				Unimproved					
				Improved	Shared	Other Unimproved	Open Defecation	Improved	Shared	Other Unimproved	Open Defecation	Improved	Shared	Other Unimproved	Open Defecation		
Senegal	1990	7 514	39	58	20	14	8	21	5	18	56	36	11	16	37	Moderate progress	30
	2015	14 967	44	65	22	12	1	34	8	34	24	48	15	23	14		
Serbia	1990	9 735	50	98	1	1	0	96	1	3	0	97	1	2	0	Limited or no progress	NA
	2015	9 424	56	98	1	1	0	94	1	5	0	96	1	3	0		
Seychelles	1990	69	49	-	-	-	-	-	-	-	-	98	-	1	1	Met target	25
	2015	94	54	-	-	-	-	-	-	-	-	98	-	1	1		
Sierra Leone	1990	4 043	33	21	42	36	1	5	14	51	30	10	23	47	20	Limited or no progress	7
	2015	6 319	40	23	45	24	8	7	21	38	34	13	31	32	24		

Joint Monitoring Program report data showing sanitation access by country. See Sierra Leone's access level for national, urban and rural.

FOR MORE INFORMATION:

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