



# GLAAS 2012 REPORT

UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water

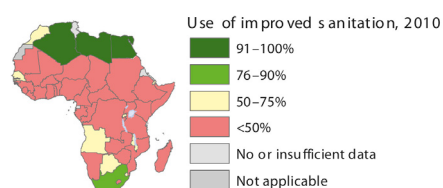
## THE CHALLENGE OF EXTENDING AND SUSTAINING SERVICES

The UN-Water Global Analysis and Assessment of Sanitation and Drinking-water (GLAAS) monitors the efforts and approaches to extend and sustain water, sanitation and hygiene (WASH) systems and services. Between 1990 and 2010, over 321 million in Africa people gained access

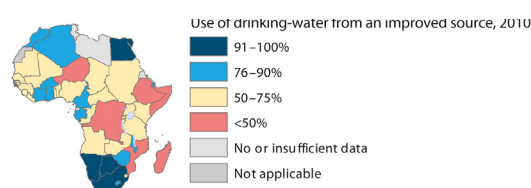
to improved water sources and 189 million people gained access to improved sanitation.

In Africa financing is insufficient and the institutional capacity to absorb what is available is limited. The danger of slippage against the MDG target is real.

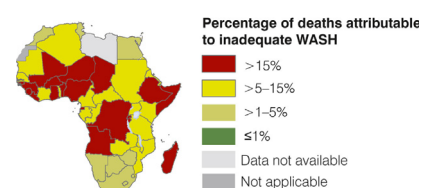
### Percentage of population using improved sanitation facilities (2010)



### Percentage of population obtaining drinking-water from an improved source (2010)

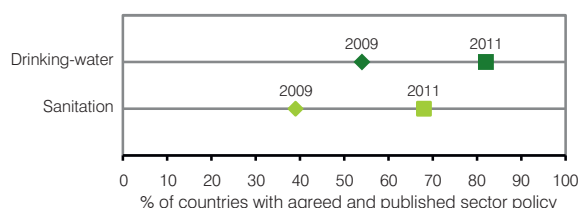


### Percentage of deaths attributable to inadequate WASH

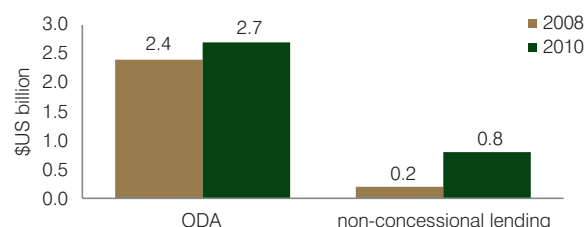


**POLITICAL WILL AND ACCOUNTABILITY: There is growing political will for WASH implementation, as expressed in new efforts to be more accountable and to plan and coordinate more effectively.**

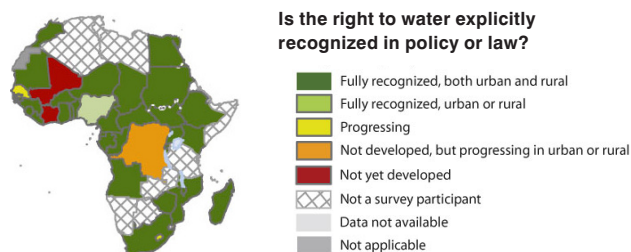
### African countries report strong progress in adopting and publishing WASH sector policies



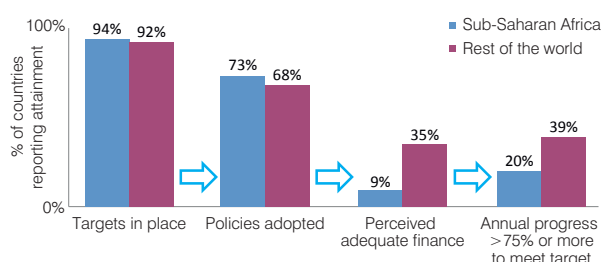
### Despite the global financial crisis, external support to Africa for WASH increased from 2008 to 2010



### Over 80% of African countries recognize the right to water, and nearly 60% the right to sanitation



### Despite progress on setting targets and establishing policies, output is insufficient to meet national targets



In 2011, countries reported substantive political commitments to WASH, increasing funding allocations, and leadership and coordination among implementing agencies. The majority of countries have established transparent WASH service provision targets and have put in place supporting policies, and many monitor against these targets. Countries also confirm that the rights to water and sanitation are increasingly adopted in laws or policies. Accountability can be improved, as most countries do not include consumers in planning and only half have established regular review processes. The total amount of

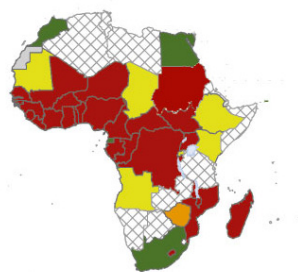
development aid for sanitation and water for Africa increased from 2008 to 2010 to US\$ 2.7 billion, along with a notable increase in non-concessional lending for sanitation and water.

Despite these efforts, most countries are falling short on meeting their own national WASH commitments, with over 80% of countries reportedly falling significantly behind the trends required to meet their defined national access targets for sanitation and drinking-water.

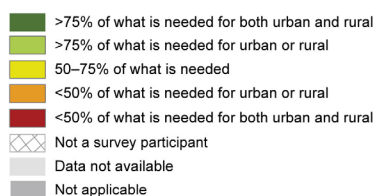
**DOMESTIC FINANCING:** There is insufficient domestic financing for WASH overall, with particularly serious shortfalls for sanitation. This is exacerbated by difficulties in spending the limited funds that are received.

### In Africa sanitation funding remains inadequate

Sanitation, adequacy of financing, 2011



Are financial flows sufficient to meet MDG targets?

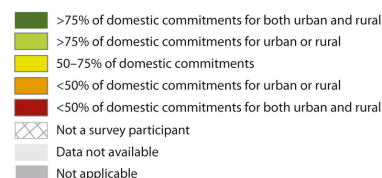


### Average absorption rates of central African government capital commitments are low

Sanitation, absorption of committed domestic funds, 2011

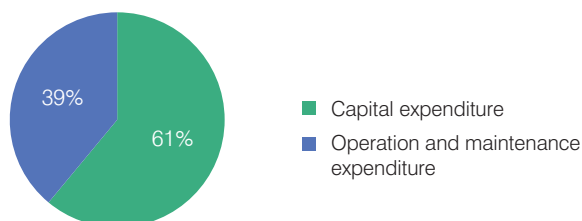


What is the percentage of domestic capital commitments utilized?

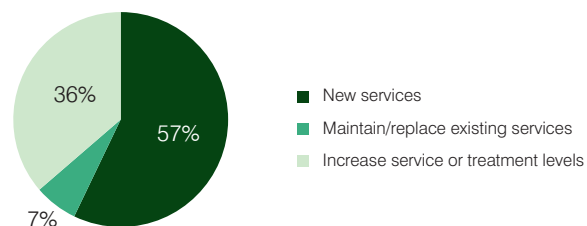


**SUSTAINABILITY:** There is a risk of slippage on progress made unless sufficient financial and human resource support is given to sustain operation and maintenance.

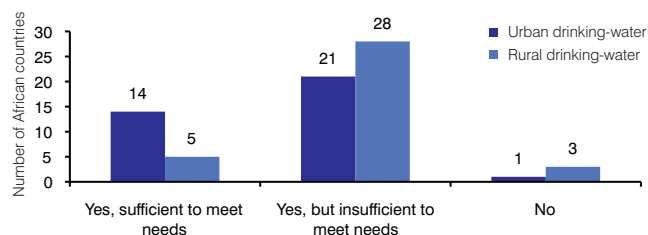
### Governments in Africa report that 39% of WASH funding is allocated to support operation and maintenance of services



### Global data suggest that less than 10% of external aid is directed towards maintenance of existing services.

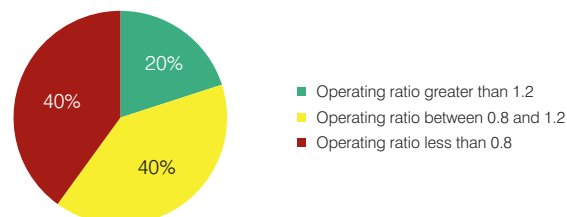


### Most countries in Africa report insufficient staff to operate and maintain urban and rural drinking-water systems



Is there sufficient staff to operate and maintain urban and rural drinking-water systems?

### Two-fifths of African countries indicate that revenues cover less than 80% of operating costs for urban utilities.



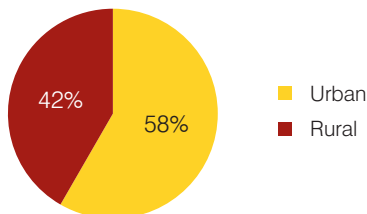
## TARGETING OF FINANCIAL RESOURCES

### Domestic WASH funding can be made more equitable

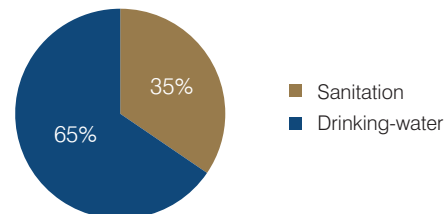
Drinking-water continues to absorb the majority of WASH funding, even in countries with relatively high drinking-water supply coverage and relatively low sanitation coverage. Countries also indicate that expenditures are largely targeted

for extending services in urban areas, even in countries where urban areas are relatively well served and rural areas are off-track.

#### Funds are largely targeted for extending services in urban areas

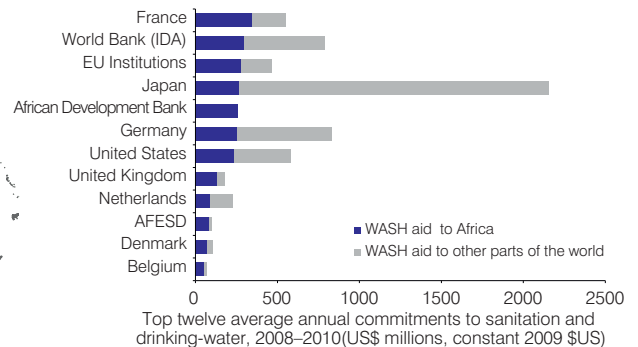
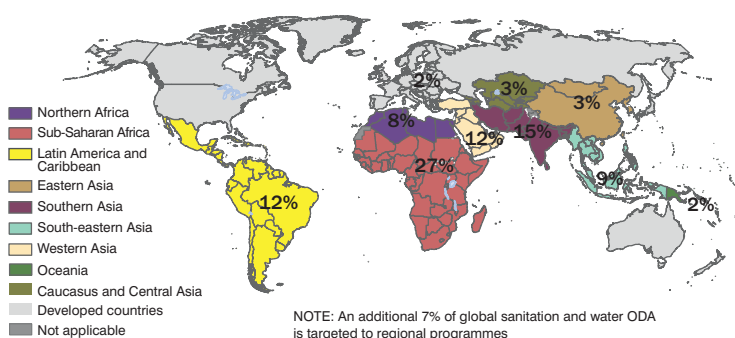


#### Drinking-water continues to receive the majority of WASH funding

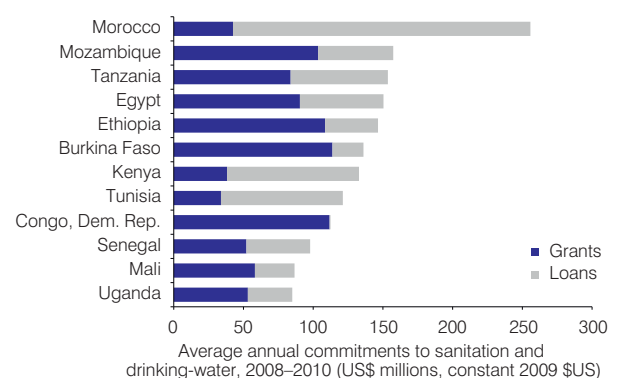
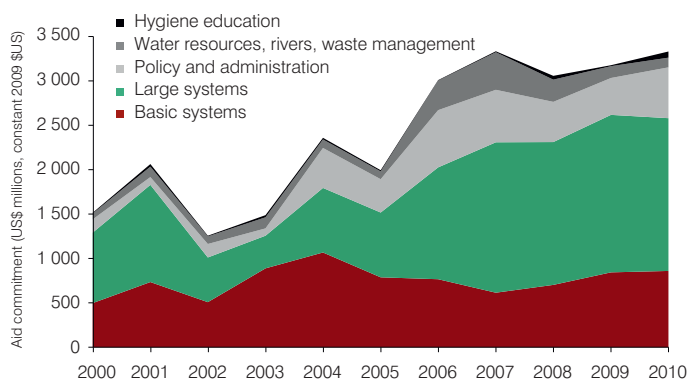


### Targeting of external support for WASH can be further improved to assist those most in need

#### 35% of sanitation and drinking-water aid is targeted to Africa



#### Aid for basic sanitation and drinking-water services increased from 16% to 26% of overall sanitation and water aid commitments between 2008 and 2010



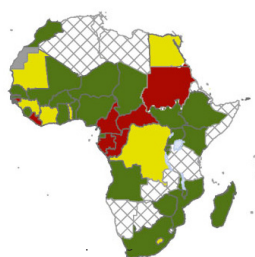
## MONITORING AND EVALUATION: Improved monitoring is required to generate the information for evidence-based decision making.

The use of periodic reviews to monitor and evaluate the performance of sanitation and drinking-water uptake and services is increasingly used by countries as a basis for planning. However, the lack of robust data is a potentially major constraint to progress.

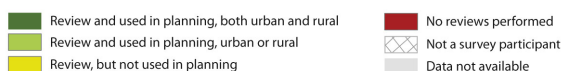
- Half the countries did not report on access to adequate sanitation in schools or health-care facilities, suggesting a lack of monitoring systems and capacity.

- Despite clear country responses indicating insufficient staff in water and sanitation services, only half of countries were able to provide data for staff in place and one third could anticipate staffing needs.
- To strengthen the collection of WASH financial information, a harmonized method of data monitoring is needed.

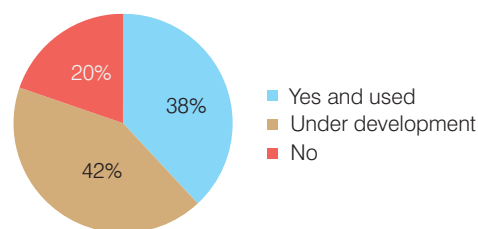
### Periodic sector reviews in Africa are being increasingly used in sanitation planning.



Is there an annual or biennial review on sanitation?

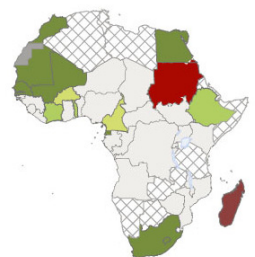


### African countries report that only 38% of urban/rural sanitation and drinking-water sectors are informed by reliable information monitoring systems



Is there a national information system used to inform decision-making?

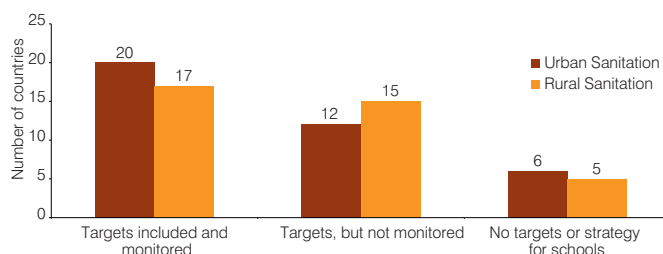
### Nearly two-thirds of African countries could not report on improved drinking-water coverage in health-care centres



What percentage of health-care facilities have improved water supplies?



### Half of respondent African countries fail to monitor against established targets for school sanitation



The 2012 UN-Water GLAAS report presents data received from 75 developing countries, covering all the Millennium Development Goal (MDG) regions, of which 38 from Northern and Sub-Saharan Africa, and from 24 external support agencies (ESAs), representing approximately 90% of official development assistance (ODA) for sanitation and drinking-water.

The 2012 report draws on the latest information, including data from the Organisation for Economic Co-operation and Development (OECD) Creditor Reporting System (CRS), and data gathered through two sets of questionnaires: one for low- and middle-income countries and one for ESAs. These questionnaires have allowed countries and donors to score their progress and WASH inputs according to objective criteria. While the responses are based on consensus from multiple national stakeholders and are subject to validation, it is acknowledged that the accuracy of responses will show variability. Thus, to some extent, the responses should be interpreted as a self-assessment of country and donor priorities.

For further information: [www.who.int/water\\_sanitation\\_health/glaas](http://www.who.int/water_sanitation_health/glaas) or [glaas@who.int](mailto:glaas@who.int)

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.