**WASH PLANNING TIPS FOR AN EMERGENCY OPERATION**

**Tip 1: Nature of Outcomes and Outputs – shorter term vs. longer term**

* Outcome 1 → 5 outputs, each with a specific focus area. This outcome leans towards “emergency” context i.e., consisting of shorter-term activities that fulfils immediate needs.
* Outcome 2 → 4 outputs, each with a specific focus area. This outcome leans towards “developmental/sustainable” context i.e., consisting of longer-term activities that fulfils needs in the longer-run. Outcome 2 may also be selected if the scope is more extensive e.g., WASH services for the entire affected population (vs. only for a targeted population).

**Tip 2: Do not reinvent the wheel** *(unless you really really have to)*

The page below is a list of outcomes, outputs and indicators, where National Societies select only those that are applicable to their emergency operations. To save time in the approval process, do not create new outcomes, outputs or indicators, or change the wordings, unless there is an absolute need to do so (please provide justification if this is the case).

**Tip 3: Indicator and target**

For every indicator selected, a target must be mentioned. This is to enable National Societies to gauge progress/achievement of activities, and to be able to report against it.

**Tip 4: Some WASH do’s**

* When planning WASH activities during an emergency operation:
* On-going and planned activities of an emergency operation should address and relate with needs on the ground. For e.g., if sanitation was found as one of the needs resulting from an assessment, there should be relevant and appropriate sanitation activities planned to address those needs. If there are needs that are being covered by the government and/or other organizations, this should be mentioned explicitly in your emergency operation documents.
* If the timeframe of the emergency operation is rather long e.g., 12 months, consider incorporating longer-term WASH solutions, in addition to fulfilling immediate WASH needs of those affected. Having the backing of an EA is a great opportunity to develop and strengthen the capacity of National Societies, which otherwise may not be possible.
* Ensure balance of WASH support i.e., between components of water, sanitation and hygiene e.g., number of sanitation recipients should match the number of water recipients.
* Ensure balance of ‘hardware’ and ‘software’ support e.g., when there is a plan to distribute hygiene items, it should be coupled with hygiene promotion activities. Remember - no distribution without training!
* Ensure distribution of goods is followed up with post distribution monitoring activities.
* Consider the use of cash and voucher assistance, particularly in addition to or in place of hygiene goods.
* According to the ‘DREF and early recovery fact sheet’, DREF funding can be used to provide assistance that bridges the gap between meeting emergency needs and longer-term recovery support. Examples of early recovery activities for WASH include minor repairs to water supply infrastructure, assistance to repair toilets, training communities to operate and maintain WASH facilities and replenishing damaged WASH equipment and supplies for communities.

**Tip 5: IFRC WASH contacts**

If in need of WASH technical support/advice or if you have questions/feedback in relation this document, please contact: WASH.geneva@ifrc.org / Alexandra.machado@ifrc.org

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**An overall look at WASH Outcomes and Outputs**

**WASH Outcome 1:**

**Immediate reduction in risk of waterborne and water related diseases in targeted communities**

**WASH Output 1.1:**

Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

**WASH Output 1.2:**

Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population

**WASH Output 1.3:**

Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population

**WASH Output 1.4:**

Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population

**WASH Output 1.5:**

Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

**WASH Outcome 2:**

**Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase**

**WASH Output 2.1:**

Continuous monitoring and evaluation of water, sanitation, and hygiene situation is carried out in targeted communities

**WASH Output 2.2:**

Community managed water sources giving access to safe water is provided to target population

**WASH Output 2.3:**

Improved access to and use of adequate sanitation by the target population

**WASH Output 2.4:**

Hygiene promotion activities are provided to the entire affected population

**WASH assessment/M&E**

**Water supply**

**Sanitation**

**Hygiene promotion**

**Hygiene goods/items**

**More “emergency” context**

**More “developmental/sustainable” context**

| **WASH outcomes and outputs** | **WASH indicators** |
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| **WASH Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities** | * % of target population that has access to sufficient safe water
* % of target population that is using adequate sanitation
* % of target population that has increased knowledge of hygiene practices (specify according to context)

The below indicators could also be opted: * No. of households provided with safe water services that meet agreed standards according to specific operational and programmatic context.
* No. of households reached with awareness raising activities on improved treatment and safe use of wastewater
* No. of households reached with key messages to promote personal and community hygiene
* No. of people provided with knowledge on and access to improved excreta disposal
* No. of community-based water and sanitation management plans developed
 |
| **WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities** | * No. of assessments/monitoring visits undertaken and shared
 |
| WASH activities under Output 1.1. * Conduct training for RC volunteers on carrying out WASH assessments.
* Conduct initial assessment of WASH situation in targeted communities.
* Continuously monitor WASH situation in targeted communities.
* Coordinate with other WASH actors on target group needs and appropriate response.
 |
| **WASH Output 1.2:** **Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population** | * No. of people provided with safe water (according to WHO standards)
* No. of litres of safe water distributed (cumulative)
* Average amount of safe water distributed per person per day
* No. of water distribution points
* % of people practicing good water handling practices which includes use of sufficient water storage container
 |
| WASH activities under Output 1.2.* Provide safe water to XX people in targeted communities through [specify source of water: e.g. water trucking, well or pipeline rehabilitation, mobile water treatment plant, or household water treatment].
* Monitor use of water through household surveys and household water quality tests.
* Determine the appropriate method of household water treatment for each community based on effectiveness and user preference.
* Distribute XX household water treatment products [specify: chlorine tablets, sachets, liquid chlorine, or filters], sufficient for XX days, to XX people.
* Train population of targeted communities [specify: on safe water storage, on safe use of water treatment products].
* Monitor treatment and storage of water through household surveys and household water quality tests.
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| **WASH outcomes and outputs** | **WASH indicators** |
| **WASH Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population** | * No. of people provided with excreta disposal facilities
* Average no. of people per toilet
* No. of households involved in one or more environmental sanitation interventions according to context (i.e. solid waste management, drainage, vector control)
* Facilities are designed after consultation with affected population
* % of facilities that are regularly cleaned and maintained
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| WASH activities under Output 1.3. * Select design for toilets based on consultation with targeted communities with considerations for cultural preference, safety, access for children and disabled, anal cleansing practices, national standards, and menstrual hygiene as well as environmental impact and sustainability.
* Construct XX toilets in XX [specify location: households, schools, health centres, public areas] for XX people.
* Ensure toilets are clean and maintained through [specify cleaning and maintenance plan for toilets: community mobilization or management of cleaners].
* Equip toilets with handwashing facilities, anal cleansing material or water and menstrual hygiene disposals and ensure they remain functional.
* Carry out [specify environmental sanitation activities: drainage, vector control, and solid waste] in targeted communities.
* Mobilize targeted communities to construct XX toilets and carry out environmental sanitation activities.
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| **WASH Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population** | * No. of people reached by hygiene promotion activities
* No. of volunteers involved in hygiene promotion activities
* % increase in 3-5 aspects of personal hygiene knowledge (specify according to context)
* Indicator of evidence of key hygiene practices (e.g. % of handwashing facilities which show evidence of use & regular maintenance)
 |
| WASH activities under Output 1.4. * Conduct needs assessment: define hygiene issues and assess capacity to address the problem.
* Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).
* Develop a hygiene communication plan. Train volunteers to implement activities from communication plan.
* Design/Print IEC materials.
* Assess progress and evaluate results.
* Engage community on design and acceptability of water and sanitation facilities.
* Construct or encourage construction and maintenance of handwashing facilities in targeted communities.
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| **WASH Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population** | * No. of households provided with a set of essential hygiene items (e.g. hygiene kits, water storage containers, soap, household water treatment, and cleaning kits)
* No. of households trained in the use of distributed items
* % of households using items properly
 |
| WASH activities under Output 1.5. * Determine the needs for hygiene NFIs, including soap, water storage, and menstrual hygiene for each community based on health risks and user preference in targeted communities in coordination with the WASH group or cluster.
* Distribute XX hygiene kits, sufficient for XX month(s) to XX people.
* Train population of targeted communities in use of distributed hygiene kits.
* Determine whether additional distributions are required and whether changes should be made.
* Monitor use of hygiene kits and water treatment products and user’s satisfaction through household surveys and household water quality tests.
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| **WASH outcomes and outputs** | **WASH indicators** |
| **WASH Outcome 2: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase** | * % of target population that both has access to and uses sustainable water supply
* % of target population using sanitation facilities
* % of target population that are practicing good hygiene behaviours (specify according to context)

The below 5 indicators (as stated in the key data annex, taken from the operational plan) could also be opted: * No. of households provided with safe water services that meet agreed standards according to specific operational and programmatic context.
* No. of households reached with awareness raising activities on improved treatment and safe use of wastewater
* No. of households reached with key messages to promote personal and community hygiene
* No. of people provided with knowledge on and access to improved excreta disposal
* No. of community-based water and sanitation management plans developed
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| **WASH Output 2.1: Continuous monitoring and evaluation of water, sanitation, and hygiene situation is carried out in targeted communities** | * No. of monitoring/evaluations carried out and shared
 |
| WASH activities under Output 2.1. * Conduct training for RC volunteers on carrying out WASH monitoring and evaluation.
* Conduct baseline survey of WASH situation in targeted communities.
* Continuously monitor WASH situation in targeted communities.
* Coordinate with other actors on target group needs and appropriate response.
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| **WASH Output 2.2: Community managed water sources giving access to safe water is provided to target population** | * % of target population with access to an improved water source
* % of target communities with financial resources to operate and maintain water facilities, access to technical support, and access to spare parts
 |
| WASH activities under Output 2.2. * Provide safe water to XX people in targeted communities through [specify source of water: e.g. well or pipeline construction or rehabilitation].
* Monitor use of water through household surveys and household water quality tests.
* Train water committees in management of water supplies and operation and maintenance of infrastructure.
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| **WASH Output 2.3: Improved access to and use of adequate sanitation by the target population** | * No. of people with access to an improved sanitation facility
* % of constructed sanitation facilities maintained by target population
* No. of households involved in one or more environmental sanitation interventions according to context (i.e. solid waste management, drainage, vector control)
 |
| WASH activities under Output 2.3.* Select design for toilets based on consultation with targeted communities with considerations for cultural preference, safety, access for children and disabled, anal cleansing practices, national standards, and menstrual hygiene as well as environmental impact and sustainability.
* Construct XX toilets in XX [specify location: households, schools, health centres, public areas] for XX people. [Note: Unless a sufficient explanation can be provided, the number of sanitation beneficiaries must meet number of water beneficiaries].
* Carry out [specify environmental sanitation activities: drainage, vector control, and solid waste] in targeted communities.
* Mobilize targeted communities to construct XX toilets and carry out environmental sanitation activities.
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| **WASH outcomes and outputs** | **WASH indicators** |
| **WASH Output 2.4: Hygiene promotion activities are provided to the entire affected population** | * No. of people reached by hygiene promotion activities
* No. of volunteers involved in hygiene promotion activities
* % increase in personal hygiene knowledge (e.g. critical times to wash hands with soap)
* Indicator of evidence of key hygiene practices (e.g. % of hand-washing facilities which show evidence of use & regular maintenance)
 |
| WASH activities under Output 2.4. * Conduct baseline survey to define hygiene issues and assess capacity to address the problem.
* Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).
* Develop a hygiene communication plan. Train volunteers to implement activities from communication plan.
* Design/Print IEC materials.
* Assess progress and evaluate results.
* Engage community on design and acceptability of water and sanitation facilities.
* Construct or encourage construction and maintenance of handwashing facilities in targeted communities.
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