Ghana

HSBC Water Programme Highlights Report

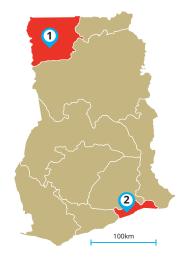
2017-19

In 2012, HSBC launched its Water Programme to tackle the global water crisis, bringing together the expertise of Earthwatch, WaterAid and WWF.

During its eight years, WaterAid strengthened systems for clean water, decent toilets and good hygiene, changing normal for communities in six countries: Bangladesh, Ghana, India, Nepal, Nigeria and Pakistan.

▼ Hawa washes her hands outside her newly constructed toilet. Open defecation was common in the Bihee community until we promoted sanitation and hygiene awareness with local partners.





- 1. Wa Municpality
- 2. Accra

Ghana

In phase one of the programme (2012–2016), WaterAid Ghana improved access to water, toilets and hygiene services across the North, East, Upper East and Upper West regions of the country, reaching 104 communities with clean water, and helping 50 eradicate open defecation.

Phase two (2017-2019) focused on the municipality of Wa in Tamale, improving local services for rural and peri-urban communities and their healthcare facilities.

This report summarises the achievements from the second phase of the HSBC Water Programme.





The challenge

Although Ghana's Government has made significant progress expanding water, sanitation and hygiene (WASH) access, the country still faces significant challenges. 8 in 10 people now have basic drinking water, but three quarters of households are exposed to faecal contamination in their supply¹.

Meanwhile, nearly 1 in 3 people go to the toilet in the open, and only 4 in 10 households have basic handwashing facilities².

These problems extend into the health sector. In 2017, an assessment by WaterAid Ghana found that health services in the municipality of Wa were particularly affected, with critical gaps in WASH services across its ten Community Health and Planning Services (CHPS) centres and 29 clinical, public and maternity health centres. Most could not meet minimum requirements for adequate clean water supply, safe toilets and management of general and biological waste.

During phase two of the HSBC Water Programme, we focused on enhancing WASH in Wa's communities and healthcare facilities at the same time. Crucially, we applied an approach of influencing government at all levels to adopt and replicate our models.

By doing some, building capacity, and influencing the rest, we are able to make an even bigger difference in our vision of a world where everyone, everywhere has clean water, decent toilets and good hygiene.

> A young student practices good hygiene, washing their hands after using WaterAid constructed toilets.

Results



Clean water and decent toilets in five healthcare facilities, reaching nearly 11,600 people.



3,600 people reached with clean water in households and communities.



More than 5,700 people reached with decent toilets.



Nearly 16,000 people reached with good hygiene messaging.



660 people supported to claim their WASH rights.



^{1.} UNICEF (2020). Ghana: Water, Sanitation and Hygiene. www.unicef.org/ghana/water-sanitation-and-hygiene

WHO/UNICEF (2019). Progress on household drinking water, sanitation and hygiene 2000-2017. Special focus on inequalities. New York.

Progressive solutions in healthcare facilities



We identified Busa, Charia and Charingu healthcare facilities and the CHPS in Boli as being in need of urgent, tailored support. We consulted with staff and visitors to understand their needs, such as accessible toilets for both outpatients and maternity wards, to help in an equitable and inclusive way. Nearly 11,600 staff and visitors have now benefitted from the improved WASH services implemented in the centres.

As these services were built, we developed a wider system of regular monitoring, maintenance, financial support and community backing in parallel to ensure local ownership, capacity and sustainability.

We trained more than 80 workers in six health centres on the World Health Organisation's WASH Facility Improvement Tool (WASH-FIT). This will help them assess the state of their WASH services and recommend improvements to the Municipal Health Directorate.

We also upskilled staff from the Municipal Health Directorate and Assembly too, showing them how to assess and develop costed plans for the future investment needed to expand and sustain WASH services.

Our project also raised service standards in the healthcare facilities. We trained workers on the human rights-based approach to WASH and their corresponding obligations to visitors, and how to reduce the risk of hospital acquired illness through WASH infection prevention and control.

▼ Alberta, a midwife at Busa Healthcare Centre, practices good hygiene before and after treating patients. She says "Work has become more exciting and we get to practice what we are trained to do."



We installed:

- Inclusive, accessible toilets
- Clean water supplies through solar-powered systems
- Handwashing facilities at point of care for staff and visitors
- Incinerators for proper disposal of medical waste

Creative hygiene campaign

We also worked in the communities served by Wa's healthcare facilities, where a lack of clean water, decent toilets and good hygiene had dire impacts on community health.

Together with our local partner ProNet, staff from municipal government, the District Assembly and community leaders, we created the Clean Community Campaign. This is focused on five vital hygiene behaviours:

- handwashing with soap under running water;
- using a decent toilet;
- eating thoroughly cooked or re-heated food;
- safe management of medical waste;
- safe collection and storage of water for household use.

The campaign has successfully reached nearly 16,000 community members, motivating them to adopt good hygiene habits, and has been embedded in ongoing government health service activities. Frontline staff of the Wa Municipal Health Directorate and community health volunteers will continue this important work to reach many more.



Kaapouri no longer defecates in the open and is able to use her toilet safely without assistance from her two children.

We also helped communities understand their human rights to water and sanitation, and Municipal Assembly members what their own roles and responsibilities were in providing them. This empowerment led to new grassroots advocacy groups that voice community concerns around WASH services and demand action from duty-bearers.

At the end of the programme, we had reached 3,600 people in Wa with clean water, more than 5,700 people with decent toilets, and four communities were declared open defecation free.



"When I had my firstborn, there was a hand pump borehole on the premises of the healthcare facility, but when you delivered you had to go home to bathe. Now water is available everywhere in the healthcare facility." Sofia and her third born child, happy and healthy following birth with access to clean water.

Political priorities

Our core work in Wa emphasised a district-wide approach, working closely with local authorities.

We facilitated Wa Municipal Assembly's first ever WASH sector coordination meetings, inviting their development partners and regional stakeholders to attend. These included the Regional Environmental Health Department, Ghana Water Company, traditional authorities and others.

The meetings discussed progress and challenges in communities and affirmed the attendees' commitment to improving WASH services.

The Municipal Assembly has now institutionalised these meetings for the future and has already used them to have toilets upgraded in three local schools.

Due to the success of our system strengthening work in Wa, authorities are also taking lessons and applying them elsewhere. Local governments have adopted the use of solar integrated water supplies, and the Municipal Assembly has built gravity systems in six other communities.

The Municipal Health Directorate has also expanded the WASH-FIT training scheme to reach the remaining 170 health workers across the municipality.



Emma (right) is a Municipality Assembly Member and regional focal person for the Community Led Total Sanitation scheme. She regularly visits Wa to speak with community members like Kaapouri (left) about sanitation.



Future vision

Phase two of the HSBC Water Programme offered a unique opportunity in Ghana to build on gains made in earlier years. We provided more targeted support to the critical areas of WASH in healthcare facilities and surrounding communities.

The project's district-wide approach strengthened the regional health system, and engaged municipal authorities and communities by encouraging action and support planning. Together, we have expanded access to sustainable clean water, decent toilets and good hygiene for thousands of people.



Over the two phases and eight years of the global HSBC Water Programme, we have reached:

- 1.72 million people with clean water
- 2.7 million people with decent toilets
- 3.5 million people with good hygiene

With the support of HSBC, WaterAid has changed normal for millions of people for good, helping communities, care givers and governments build a prosperous future.



▲ Like Hawa, many community members of Wa municipality are now able to reap the benefits clean water, decent toilets and good hygiene bring.

We are an international not-for-profit, determined to make clean water, decent toilets and good hygiene normal for everyone, everywhere within a generation. Only by tackling these three essentials in ways that last can people change their lives for good.

wateraid.org



