

WATER, SANITATION AND HYGIENE POLICY ACF-IN



Contents

2	ACRONYMS	
3	INTRODUCTION	
4	GLOBAL WATER AND SANITATION PROBLEM	
5	INTERNATIONAL COMMITMENTS REGARDING WATER	
5	AND SANITATION ISSUES International Commitment Benchmarks Human Rights Issues	
7	ACF-IN WATER AND SANITATION APPROACH	
7	Global Aim of ACF-IN Water and Sanitation Projects	
10	Principles of Intervention linked to Water and Sanitation Projects	
12 14	Criteria of Intervention linked to Water and Sanitation Projects Modalities of Interventions linked to Water and Sanitation Projects	
22	Cross cutting Issues	
25	ANNEXES	
25	Annex 1: Typology of Humanitarian Contexts	
26	Annex 2: Humanitarian Situations and Their Evolutions	
26	Annex 3: ACF-IN Mechanisms of Response	
28	Annex 4: ACF-IN Sector's Intervention Domains and Activities	
30	Annex 5: The Concept of Vulnerability	
31	Annex 6: The ACF-IN Charter	
32	REFERENCES	

ACRONYMS

ACF Action Contre La Faim

Action Contre La Faim International ACF-IN

ASAL Arid and semi-arid land

CESCR Committee on Economic, Social and Cultural Rights

Department For International Development DFID

Disaster Preparedness DP

Humanitarian Aid Department of the European Commission ECHO

European Union EU

General Agreement of Trade in Services GATS

HIV/AIDS Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome

Logical Framework Approach LFA MDG Millennium Development Goals NGO Non-Governmental Organisation

SPHERE Shared Public Health Emergency Response Efforts

TFC Therapeuthic Feeding Center

United Nations UN

WHO World Health Organisation

INTRODUCTION

In its fight against hunger and malnutrition, Action Contre La Faim Internationals' (ACF-IN) Water, Sanitation and Hygiene activities stand both at the curative care (delivering proper water and sanitation facilities to TFCs and Health centres when relevant) and at preventive care levels (directly assisting public health and food security projects, and considering environmental care). This paper aims to establish the Action Contre La Faim International position and course of action as regards those different issues related to the Water, Sanitation, Hygiene sector. The overall purpose of this paper is to set out an organisational policy in relation to water, sanitation and hygiene programs aiming both at proposing a standard approach and serving as a platform from which to develop the technical strategy for the sector.

This Water and Environmental Sanitation Policy fits in the more global ACF-IN Technical Policy also considering the ACF-IN Hygiene Promotion/Health Education Policy, ACF-IN HIV-AIDS Policy and ACF-IN Gender Policy. The Water and Environmental Sanitation Policy integrates some key documents and standards, including WHO guidelines, SPHERE standards (see Box 1) and main donors water policies. Those documents, including the present policy recognize and defend the application of a Right to Water and Human Dignity. References to main documents and web addresses are available at the end of this document.

GLOBAL WATER AND SANITATION PROBLEM

Access to water and sanitation is one of the major challenges of the 21st century. According to WHO, across the world, 1.1 billion people do not have access to safe water and 2.4 billion people do not have access to basic sanitation facilities. As a consequence, every year around 4 million people, the majority of whom are children, die from water and sanitation related diseases.

Water is not only important for improving public health, but also for general livelihoods: crop production, livestock production, industry, commerce depend on access to water. Water-supply conditions therefore affect health, hunger, and poverty as well as community development.



This inadequate access to water and sanitation is due partly to a lack of infrastructure but also to poor management that creates waste, contamination and degradation of the environment. Water shortages may lead to tensions between individuals, communities or even countries, which can evolve into conflicts. At the same time, the demand for water is increasing due to population growth, urbanisation (rural exodus) and industrialisation. Urbanisation has also created extremely poor sanitary conditions.

Most of these problems can be solved through comprehensive and integrated management of water resources and demand. Water is a finite resource that must be managed with a global vision that works at three levels: international, to define rules to protect water resources and to avoid international conflicts; national, to apply defined rules and to define national water-access policies; and local, to develop local initiatives to ensure communities' water access.

INTERNATIONAL COMMITMENTS **REGARDING WATER AND SANITATION ISSUES**

International Commitment Benchmarks

Over the last thirty years, the United Nations have been especially conscious of the significant role played by water and sanitation in human development and have set out to define some general plans for development:

In the conference of Mar de Plata in 1977, the United Nations declared the Eighties as the International Decade of Water and Sanitation, with a clear objective: 100% world-wide coverage of safe water and sanitation.

In 1992, the Statute of Dublin defined 4 fundamental principles:

- Fresh water is a vulnerable and finite resource, which is essential for life, development and the environment.
- Development and management of water should have a participative focus, involving the users, and those responsible at all levels, in the management plans and the politics of water.
- Women play a fundamental role in the provision, management and safekeeping of water.
- Water has an economic value in every aspect and has to be recognised as an economic good.

The Sphere Project (see Box 1) was launched in 1997, and reviewed in 2004, by a group of humanitarian NGOs and the Red Cross and Red Crescent movement, who framed a Humanitarian Charter and identified Minimum Standards to be attained in disaster assistance. The Charter describes the core principles that govern humanitarian action and reasserts the right of populations affected by disaster, whether natural or man-made (including armed conflict), to protection and assistance. It also reasserts the right of disaster-affected populations to life with dignity.

In the Forum of The Hague in 2000, an attempt was made to establish an international policy for water under the name of World Vision of Water. This policy developed three sectors: water for people, water for food and water for nature. The principal theme, which the document develops, is the integrated management of resources. One of its most important premises is that communities decide their own level of access to safe water and the hygienic conditions for healthy living, as well as the economic activities for which they use the water, and that they organise themselves to accomplish them. The most controversial recommendation is that a price must be placed on the total cost of water services (and it recommended doing so through the users).

The Kyoto Forum in 2003 focused on solutions and perspectives for the future, and the two main debates were private versus public management, and the accomplishment of the Millennium Goals, which aim to halve the number of people without access to safe water and sanitation by 2015.

The Mexico World Water Forum, in 2006, reaffirmed through the motto 'local action for a global challenge' the necessity to increase participative approach, decentralised cooperation and generally increase the assistance to the sector.

Human Rights Issues

The Human right to water and sanitation is only implied in the Universal Declaration of Human Rights, 1948 (Article 25) and the International Convention on Economic, Social and Cultural Rights, 1966 (Articles 11 and 12). It is only in the Convention on the Elimination of all forms of Discrimination against Women in 1979 (Article 14) and the Convention on the Rights of the Child in 1986 (Article 24) that the right to water and sanitation is explicitly stated. The fact that it is not an explicit universal human right can lead to a diffusion of the focus¹. A statement made by the UN Secretary-General Kofi Annan, on World Water Day 2001 said that "Access to safe water is a fundamental human need and, therefore, a basic human right. Contaminated water jeopardizes both the physical and social health of all people. It is an affront to human dignity."

The UN Committee adopted a General Comment No. 15 on the Right to Water on Economic, Social and Cultural Rights at its twenty-ninth session in November 2002 (UN Doc. E/C.12/2002/11). The Comment provides guidelines for States Parties on the interpretation of the right to water under two articles of the International Covenant on Economic, Social and Cultural Rights - Article 11 (the right to an adequate standard of living) and Article 12 (the right to health).

¹ The supply-driven nature of a human rights "delivery" quota can easily result in expensive and inefficient donor and government projects. The Sphere Project outlines clearly the restrictions of the supply driven approach realising the variety of appropriate humanitarian assistance and the larger issues of humanitarian protection. Demanding the delivery of human rights can also become a negative "stick" to beat governments and institutions with if used outside of a more pragmatic, collaborative, approach to development. The World Trade Organisation's discussion on The General Agreement of Trade in Services (GATS) also has serious implications on the basic universal right of access to water and sanitation, with its implications being a commodity, and the fears of a commercially driven agenda in which the "prepared" developed world can exploit the "less prepared" developing world. The commercialisation of what is considered as a basic right, especially in an environment of poor governance and regulation, raises the issue of how to ensure no inequities.

ACF-IN WATER AND SANITATION APPROACH

Global Aim of ACF-IN Water and Sanitation Projects

ACF-IN's main objective is to fight hunger and assist populations facing life-threatening situations. Water is essential for life and is (very often) a priority for threatened communities; in addition, water and sanitation issues are part of the underlying causes of malnutrition as presented in Figure 1.

The global objective of water and sanitation programmes is to guarantee, through access to water and sanitation, survival or socio-economic development, especially acting as preventive care to malnutrition, and finally impacting on the reduction of the mortality.

In many programmes (especially in emergency situations) the main concerns are sanitary risks and in these cases the objective is specifically focused on the reduction of diseases related to water, hygiene and poor sanitary conditions. This global objective can involve three aspects, i.e. specific objectives:

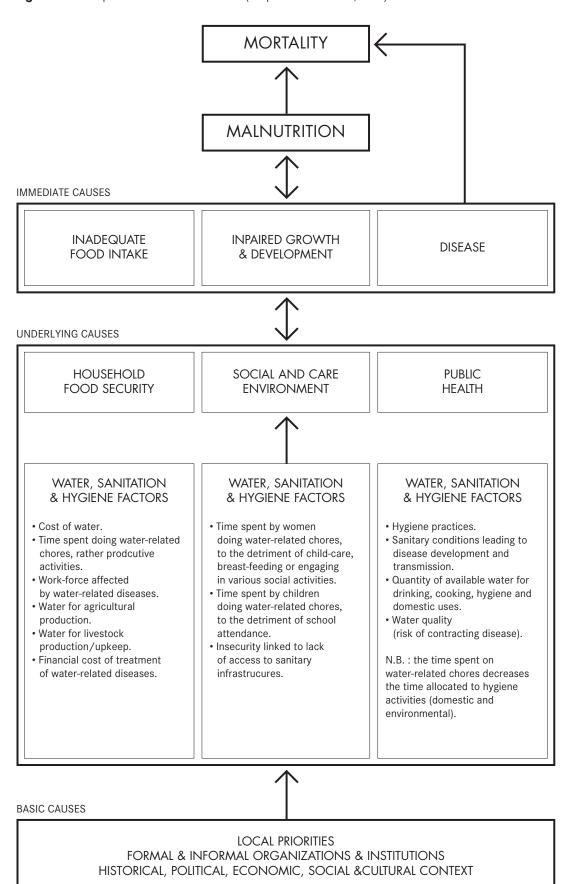
Specific objective 1 Covering the minimum requirements necessary for life (public health)

When a serious threat to human life exists it is necessary to meet the minimum needs for survival, i.e. a minimum access to water and vital sanitation structures. In each situation it is necessary to carry out a specific analysis to decide which minimum standards and reference indicators will be used. The Sphere project established a set of key indicators as a standard serving as reference in emergency situation (See Box 1). ACF-IN was involved in writing the both the first and the second version of the Sphere handbook.

Box 1 - The SPHERE Project

The SPHERE project is a global and interactive definition of standards designed for use in disaster response, and may also be useful in disaster preparedness and humanitarian advocacy. It is applicable in a range of situations where relief is required, including natural disasters as well as armed conflict. It is designed to be used in both slow- and rapid-onset situations, in both rural and urban environments, in developing and developed countries, anywhere in the world. The emphasis throughout is on meeting the urgent survival needs of people affected by disaster, while asserting their basic human right to life with dignity. SPHERE handbooks include specific points to consider when applying the standards and indicators in different situations, guidance on tackling practical difficulties, and advice on priority issues. They may also include critical issues relating to the standard or indicators, and describe dilemmas, controversies or gaps in current knowledge. It facilitates coordination, coverage and coherence of the response.

Figure 1 - Conceptual framework malnutrition (adapted from UNICEF, 1990)



Specific objective 2

Reducing the risk of the spread of water, sanitation and hygiene-related diseases (social and environmental care)

In developing countries, approximately 5 million people die each year because of water and sanitation-related diseases (WHO 2003) including 3 million people due to diarrhoeal diseases only. For ACF-IN, water has to be considered in a broad public health sense, to include general sanitary conditions and hygiene practices, mainly responsible for water contamination (faecal contamination) and pathogen development (e.g. malaria).

Specific objective 3

Guaranteeing access to water as a necessary resource for food security and socio-economic development (food security)

The means of survival and development for many communities is closely linked to the availability of water resources (see Figure 1, impacts on household food security). This dependence on water is particularly true for many rural communities who rely on agriculture and livestock production. In arid and semi-arid land (ASAL) regions, where livelihoods are chronically affected by droughts that cause disruption of the economic system, the construction of appropriate water systems and the training of communities in water-resource management can significantly decrease the vulnerability of rural populations to water shortages.

Lack of access to water also has a strong impact on the household economy, as the cost of water is an important part of many families' budgets (particularly in urban and peri-urban areas)². The economic impact of lack of access to water can be also directly linked to the water- related chores that consume time and energy (mainly for women and children), instead of productive or educational activities. The problem is particularly acute in the remote areas of ASAL regions where ACF-IN often observes several hours dedicated on a daily basis to water collection during the dry season, or in urban areas where queuing can consume a lot of time. Water-related diseases also affect food security as well as economic development; sick people represent a loss of working capacity, and the cost in terms of drugs and treatment (even traditional) has an impact on the family budget.

Improving access to water means that families have easy and sustainable access to infrastructure that supplies water in sufficient quantities and adequate quality. The focus is therefore on local capacity building in order to guarantee the sustainability of this access. It also implies a non discrimination in access to the resource, and especially considers people who do not have the capacity to pay for the water or sanitation facilities as the first group to consider.

Note: Water and sanitation projects usually have a positive impact on the social and care environment.

 $^{^{}f 2}$ For example, in Haiti, after the floods of December 2003 that destroyed the water-supply network of Port de Paix, and the lack of capacity of the government, that had just fallen, to carry out its rehabilitation, the price of water multiplied by five and reached an important part of the daily family budget.

Principles of Intervention linked to Water and Sanitation Projects

ACF-IN Water, Sanitation and Hygiene programmes fit into the Global Strategy of the organisation, the International Technical Policy, and more widely the participation of ACF-IN in the Millennium Development Goals, and its attachment to the recognition and effective application of a recognized International Right to Water, All the Water and Environmental Sanitation projects fit and ACF-IN Intervention Principles, including the ACF-IN Charter (Please refer to Annexe 6), and consider other reference documents as the ICRC Code of Conduct for the International Red Cross and Red Crescent Movement (1994).

Involvement in the Millennium Development Goals (MDGs)

ACF-IN Water and Sanitation Programmes contribute directly to seven of the Millennium Development Goals which range from halving extreme poverty to halting the spread of HIV/AIDS and providing universal primary education, all by the target date of 2015. The right to water is fundamental in meeting the Millennium Development Goals.

MDG 1 Eradicate extreme poverty and hunger

Water supply provision and hygiene promotion are related to improving life and may be linked to advocacy campaigns (e.g. Chechnya, Myanmar). Reduction of poverty through increasing access to water (allowing more time to other activities) and focus on socioeconomic development stay a key issue.

MDG 3 Promote gender equality and empower women³

Women's active participation and consultation in the programmes, especially in hygiene promotion ones, is crucial. Adapted infrastructure in water supply programmes is considered.

MDG 4 Reduce child mortality

A better water supply, in terms of both quantity and quality, contributes to a decrease in childhood diseases and therefore child mortality

MDG 5 Improve maternal health

Provision of clean and sufficient water, proper sanitation privacy and hygiene

MDG 6 Combat HIV AIDS, malaria and other diseases

Reduction of diseases (and opportunistic infections) related to water and poor sanitary conditions and mitigation component (e.g. in HIV/AIDS high prevalence contexts).

MDG7 Ensure environmental sustainability

During each intervention, the environmental risks are assessed and the impact on the environment is minimised. In every case, ACF-IN aims to sensitise the affected community and other local stakeholders, empowering them to manage their water resources more efficiently with minimum impact on the environment, e.g. through disaster preparedness activities.

MDG8 Develop a Global Partnership for Development

ACF-IN is present at many platforms (e.g. Mexico forum) and open to develop sectorial partnerships wherever this fits with its charter/strategy.

³ MDG2, related to achieving universal primary education, is not considered in ACF-IN strategy

Integrated Management of the Resource

The integrated management involves social and environmental aspects which are inseparable from resources. These three aspects should be always considered together in any programme approach.



See general considerations in Annex 5: The Concept of Vulnerability.

Criteria of Intervention linked to Water and Sanitation Projects

General criteria (all projects)

The main objective of humanitarian aid is to guarantee minimum conditions for the survival of populations faced with a crisis (mortality rate is therefore a key criterion for intervention). Generally speaking, interventions are launched when:

- The survival of populations is threatened;
- Local structures are unable to respond to needs and require emergency assistance;
- The crises are recurrent and are leading to a disintegration of the affected communities;
- The general state of under-development prevents populations from reaching minimum standards of living and human dignity;
- Communities petition for assistance.

Specific criteria (water and sanitation projects)

The main situations that justify the application of ACF-IN 'water and sanitation' programmes are when: The quality and quantity of water is at such a low level that it heightens the risks of epidemics and water-related diseases;

- The environmental sanitation conditions represent a health hazard (contaminated or unhealthy places favourable to the transmission of diseases such as malaria or scrub typhus that are linked to vectors, or diarrhoeal diseases, such as cholera).
- Populations do not have (or no longer have) access to sufficient quantities of water to meet their drinking, domestic, agricultural and livestock needs;
- The distance from water points is limiting the socio-economic development of the community (e.g. water chores reduce the time allowed for other economical activities, child care or education, especially for children and women);

Standards, benchmarks and guidelines permit a quick assessment of a situation in comparison to an established framework of reference; they must however be interpreted according to each specific context. The end or the hand-over of a programme will depend on: achieving satisfactory coverage meeting the needs, achieving (or returning to) a state of self-reliance (at the level of the community or the local authorities), the presence of other actors able to make the programme sustainable.

Target population of beneficiaries (all projects)

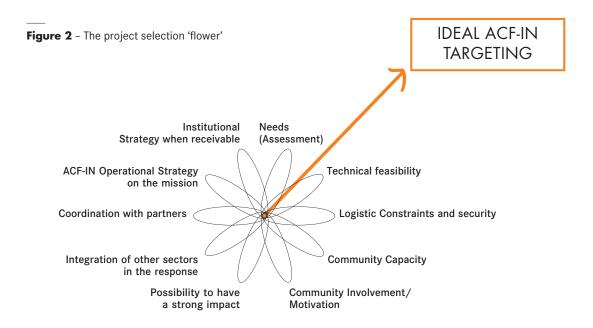
Humanitarian organisations should focus their work in areas where the needs are greatest, and where they find the most vulnerable populations. The decision of where to direct aid is made without consideration of race, religion or belief. Target populations are:

- Displaced or refugee communities4;
- Communities having lost their livelihoods due to crisis (open conflict, natural disaster, etc.);
- Ethnic or religious minorities that are victims of the discriminatory behaviour of governments, other communities or groups;
- Isolated communities, located in inaccessible rural areas, excluded from development efforts;
- Communities unable to maintain minimum standards of living and dignity (e.g. peri-urban areas).
- Populations at risk of acute malnutrition.

 $^{^{}f 4}$ In the case of displaced populations, as they usually mix with the resident populations, the actions carried out must be targeted not only at the displaced people: the residents' needs must also be assessed and taken into account in order to favour the integration of both communities and to avoid possible conflicts.

Within these target populations, specific attention will be paid to the most vulnerable groups, normally: women, children, the elderly, people with disabilities, sick people (e.g. HIV/AIDS-affected people), and marginalized and poor groups.

Report to Annex 4: ACF-IN Sector's Intervention Domains and Activities.



Definition of intervention priorities (water and sanitation projects)

The needs assessment (health status, sanitary survey, vulnerability and food-security study, infrastructure and resources inspection, hygiene knowledge and practices, etc.) done prior to starting action, should give a comprehensive picture of the situation. The analysis of the fulfilment of vital needs is systematic and can, for example, be expressed in number of litres of drinking water per person per day and, in the case of a pastoralist populations, in number of litres per animal per day. Human, financial and technical resources being limited, certain priorities must be set out to ensure minimum fulfilment of basic needs and a maximum impact of action taken:

- Vulnerable people and groups (See Annex 5: The Concept of Vulnerability)
- It is better to cover the entire targeted population to basic standards than to cover a limited population to high standards.
- Water quantity. It is preferable to have an average quantity of average quality water than to have a small quantity of high quality water (without enough quantity of water, personal and domestic hygiene are reduced, as well as parallel activities such as gardening, etc.).
- Breaking the faecal-contamination chain when sanitary risks exist.
- The coverage of needs must be guaranteed in key places: health centres and feeding centres, schools and public places.

Modalities of Interventions linked to Water and Sanitation Projects

ACF-IN will dedicate its resources to obtain a project with a strong and measurable impact, relevance/ coherence, appropriateness, coverage, efficiency and effectiveness, and which is sustainable (sustainability)5. Transversal issues, especially gender, will also be promoted through the projects. ACF-IN is accountable for its programmes, to donors, beneficiaries, financial control offices and media, and ACF-IN programmes are subject and should promote external independent evaluations, in order to validate these mainstreaming issues.

Impact

Aiming at the greatest measurable impact

The impact of water and sanitation projects is ideally demonstrated through morbidity comparison (water related diseases), especially in long term projects, and if no reliable morbidity data is available, through follow-up of proxy indicators (e.g. evolution of the daily personal domestic water quantity before and after the programme). In that sense, comparison of KAP6 surveys systematically implemented at the beginning and the end of the programme is recommended.

The global policy of ACF-IN is to produce maximum impact, not to spread out activities. Impact partly depends on the selection process. The logic of intervention is to cover each area targeted properly 7 (e.g. reaching 100% water coverage, conforming to national standards). However, It can be acceptable to spread out water points in a first phase of a programme to limit the public health risk.

Impact can also be increased through other mechanisms, including the integration of various water and sanitation components (e.g. associating water, sanitation and hygiene as a global response package), and integrating of different programme components (e.g. water and sanitation, food security).



- ⁵ Except in emergency cases.
- ⁶ Knowledge, Attitude and Practices.
- 7 In reference to national guideline, in case of post emergency and development context, and in reference to SPHERE indicators in case of emergency response.

Impact and effect will be systematically evaluated in ACF-IN water and sanitation project, ideally through health indicators follow-up (long term projects, existing medical structures), if not through proxy-indicators (e.g. daily domestic water quantity / people before and after the programme) collected through systematic comparison of pre and post project KAP survey exercises.

Integrated approaches.

ACF-IN promotes an integrated approach to its interventions when appropriate. This integrated approach includes both curative and preventive care interventions within the nutrition, food security, water and sanitation, health sectors (primary care, mental health, etc.) and also advocacy, in order to tackle the political causes of the humanitarian situation.

The integrated approach, even in the constrained operating environments of an emergency response, is accepted by ACF-IN as best practice. ACF-IN integrates improvements in hygiene, sanitation and water supply in order to positively impact on public health. Water and sanitation activities also represent a continuity between public health and socioeconomic development.

An integrated approach may involve different actors can also implement these actions, but a unique body coordinating activities is recommended.

· Household focused approach

ACF-IN believes that a project will produce its maximum impact if the needs of the population are covered in priority at the house hold level. Indeed, the improvement of access to safe water is not only insured by providing community water infrastructures, but also by insuring that suitable quantity and quality of water is used at the household level. This statement implies the use of monitoring and evaluation tools adapted to this level (KAP surveys, household sanitary surveys), the improvement of the soft part of the projects (hygiene promotion), the integration of the household in the definition of the projects and the coordination between water point committees, hygiene promoters, and households.

Appropriateness and relevance

Appropriateness is the tailoring of humanitarian activities to local needs, increasing ownership, accountability and cost-effectiveness accordingly. Relevance is concerned with assessing whether the project is in line with local needs and priorities. Water and sanitation programmes should present a technical (e.g. specific drought response) and cultural relevance.

Needs analysis driven response

In order to understand and clearly define the nature of needs and their causes, and to define the most appropriate response to a given situation, analysis must be carried out to understand the different determining factors. This analysis, carried out both before and during the intervention, must take into account:

The context:

- Factors relating to the crisis (political, natural, etc.)
- Situation prior to the crisis (conditions, resources, vulnerabilities, assets, etc.)
- Current situation and the available capacities and coping mechanisms within the affected popula-
- The possible evolution of the context

The population:

- Local specificities and socio-economic, cultural and religious constraints
- Nature of the needs and expectations of the population

The environment:

- Type of water resources available
- Climate

Multidisciplinary analysis

In order to reduce mortality and to fight effectively against malnutrition, it is essential to take into consideration all their potential determinants. The analysis of the context and the identification phase (in particular, meetings with the population concerned) must involve multidisciplinary teams (for example, water and health and/or food security).

Direct approach to populations

Ensuring that interventions reach the target population in an appropriate way is part of the ACF-IN Charter. This is essential, as it provides a measure of the success of the programme and enables an understanding of any obstacles from local, national or international groups or institutions.

In order to ensure a fair and effective intervention, direct collaboration with the populations concerned through all the steps of the project is essential and allows programme staff to:

- analyse contexts and define interventions while ensuring consultation with and participation of, the affected populations
- find the best way of fitting the programme within the existing social dynamics and building part-
- monitor the impact of the programme and avoid any obstacles that might divert the programme from its course
- disengage from the programme/ area (e.g. handing over activities to population or civil society)

Although the role of ACF-IN is to work through, with and for a population, it is important to consider the local institutional capacity and its role in the medium and long term. Therefore, the implementation of programmes may take place with local organisations and state services; the involvement of these partners depends on their agenda (political, religious, etc.) and their working capacity. If these partners hinder reaching the objectives of the programme, it will then be advisable to develop an alternative approach, through community, or even household. In those cases, specific mechanisms should be considered to insure the project's sustainability.

Understanding, respecting and integrating local factors

The project has to determine how the community's beliefs, knowledge and management of the environment can be dealt with in a positive manner. The most important aspect to keep in mind is respect. Instead of showing that a taboo or a belief is absurd because it is so in beneficiaries' own culture, staff should aim to work on understandable and appropriate messages that show the causes of a problem and should seek an effective solution with the community. In cases where it proves more convenient to change a certain habit, respect and participation should guide the way the necessary information and encouragement are provided to the community to raise awareness about the benefits of this change. Good practices in use in the communities are to be highlighted and developed.

A response adapted to the capacities and willingness of the communities

Taking into account the socio-cultural and economic characteristics of the community is a necessary condition for achieving a successful and effective project. Indeed, technical decisions must be made according to criteria that are not only technical, but also social and cultural, and so the responses chosen must be appropriate to the way of life of the communities concerned.

In order to define a project, it is therefore necessary to:

- evaluate both the willingness and the management capacity of local communities; respect local religions, beliefs and taboos (in relation to water, sanitation, etc.) and adapt technical interventions accordingly;
- evaluate the human, technical, logistical and economic resources required and available for the maintenance of the installations:
- respect the social hierarchy (but ensure that this does not interfere with the transparency and community sense of ownership of the project) and anticipate potential conflicts that could arise from the construction of water points

Involvement and participation of affected communities and local actors

The participation of the affected communities in the different phases of the programme is fundamental (identification of needs, design of the most appropriate response, implementation, monitoring and evaluation), since it guarantees the relevance and sustainability of actions in relation to needs. Development and management should be based on a participatory approach, and a programme must aim to have the maximum involvement of the concerned communities at all stages of the project management cycle. It must be led by a comprehensive grass-roots approach, opposed to a top-down one. Depending on the intervention context, the type of programme, the phase of the project and the community, the level of involvement varies from simple consultation to proactive participation in the project. A displaced community is usually in a precarious situation, having lost most of their assets, and sometimes it is difficult (or not relevant during the implementation phase) to convince people to participate actively in a project. On the other hand, a stable population should be more easily mobilised to involve itself in the project and its involvement could be a condition for external intervention.



During the implementation phase, community participation can be done through direct contributions (money or material) to infrastructure construction or, more commonly, through physical work or through working with project management staff in designing the implementation plan, defining targeting criteria and selecting areas/populations/groups to be covered. This reinforces the project's appropriation by the community and therefore improves its management. Specific consideration should be given however to vulnerable groups where direct contribution could represent an economic burden. In this case, on the contrary, the programme will aim to increase the economic power of the group (e.g. paying the community to implement its own infrastructures).

Local involvement in the ACF-IN programmes passes also by working with local staff and Southern partners and workers. Local staff/partners should be considered to run the projects wherever possible⁸, and must be therefore identified, recruited, promoted, trained and evaluated.

⁸ In some cases, managing a programme by a local staff can represent a risk due to ethnic constraints, group pressure.

Feasibility study

The needs assessment exercise should systematically be followed by a feasibility study that confirms the possibility to offer a safe and appropriate response to the identified needs. This includes mainly, for water and sanitation projects, the validation of hydrological (resource presence and potentiality) and hydro-chemical (quality of the resource suitability/WHO guidelines) suitability. Feasibility issue, in sanitation, is mainly related to specific contexts where sanitation may put environment and public health at risk (latrines in high water table context).

Appropriate, tested, replicable and sustainable techniques

The use of technologies that are appropriate to the communities' socio-cultural and economic constraints, as well as the natural environment, is a pre-condition for the success of any project. The use of techniques of proven effectiveness is the safest way to ensure that the response is both appropriate and sustainable. Low cost technologies/ maintenance mechanisms are to be encouraged where it is appropriate (especially in development contexts). Replicability of the activity by the communities is also to be promoted.

However, there are instances when a perfectly appropriate solution is not available. In such cases, the project must be inventive and look actively into wider solutions (e.g. designed for other contexts). This requires:

- a precise analysis of the needs and resources
- a study of the solutions already deployed at the local level, as well as an evaluation of the necessary modifications
- promotion, at the regional level, of techniques designed by both the local communities and other local stakeholders (South-South exchange)

Achieving a sustainable system is an issue that is considered from the outset of the programme's definition. During the first steps of an emergency the initial response must be quick and effective, and self-reliance is not necessarily an objective. However, once basic needs are met, the evolution of the response is planned with long-term sustainability in mind. This is especially true to validate the disengagement phase.

Coherence

Coherence of water and sanitation programmes will refer to the level of coordination with other partners and ensures that ACF-IN water and sanitation project strategy is consistent with the global ACF-IN mission strategy, the Country strategy when available, the technical strategy/ guidelines of the ministry in charge of water and sanitation, and the donor strategy. Coherence also refers to the integration of these activities with other ACF-IN interventions in the area, such as food security, nutrition, health, etc.

· Coordinating activities

Coordinating with the different stakeholders is crucial in order to maximise the value of the available resources, and must be maintained throughout the various phases of the project cycle, from definition to evaluation. It avoids gaps and / or overlooking issues in the response, and reduces risks of conflicts produced by an unbalanced response. This coordination must include all concerned stakeholders: the communities concerned, local, traditional and administrative authorities, other organisations present (NGOs, United Nations, private sector, etc.).

Standards and Guidelines

International and national standards and guidelines are tools to coordinate the activities and get a harmonised response. Two guidelines are commonly used in humanitarian water and sanitation interventions and therefore in ACF-IN interventions:

The WHO Guidelines for Drinking-Water Quality contains common reference value and outlines the relationship between water quality and the risks to human health. They are used more in a development context. However, it is advisable to keep them as an objective to reach even for emergency response. Water quality should be verified as close as possible to the beneficiary (Chemical water quality needs to be validated at the water point however, biological water quality should ideally be checked at both water point and household drinking water container).

The Sphere Humanitarian Charter and Minimum Standards in Disaster Response and Emergency Context. Sphere covers various fields including: water, sanitation, nutrition, food aid, shelters and site planning, and health services. Donors, policy makers and institutions often systematically refer to Sphere in relief programmes.

ACF-IN's response should ensure that minimum standards are reached (e.g. SPHERE). In specific contexts, like pastoralist areas, those standards may be reconsidered and adapted, using as a guideline, for minimal water consumption, the SPHERE guidance notes (ref) and MSF requirements. The national standards of the country of intervention, if these are below SPHERE standards, must be considered in priority, in order to offer a standardised response (e.g. prefer 25 families / water point, Afghan Rural Water Ministry standard, to SPHERE 500 people/Hand pump). In case National standards are over the SPHERE / WHO indicators, ACF-IN should at least reach national standards and advocate technically to all the key stakeholders (MOH, relevant ministry) to reach WHO / SPHERE standards and indicators. In case the programme cannot be implemented within safe standards, alternative solutions must be proposed. If not available, the programme should not be done, and the precautionary principle should be applied.

Coverage

Coverage is defined as 'the need to reach major population groups facing life-threatening suffering wherever they are'. Key issues: ensuring that the most vulnerable households are covered by the project; ensuring the appropriate geographical coverage of projects, based on identifying the most vulnerable populations. This will consider that the ACF-IN programme is properly covering its intervention area, with respect of coordination and national / international standards, and highlighting prioritization of the coverage of the most vulnerable.

Efficiency

Efficiency refers to the outputs, both quantitative and qualitative, achieved as a result of inputs. Cost effectiveness of ACF-IN (water and sanitation) projects shall be demonstrated through using proper and regular budget follow-up, procurement rules, etc.

Effectiveness

Effectiveness is the extent to which an activity achieves its purpose, or whether this can be expected to happen on the basis of the outputs. Implicit within the criterion of effectiveness is timeliness. Effectiveness will be obtained by designing and following a proper programmes timeframe, documented and standard technical monitoring of the activities, insuring the P.C.M⁹ is fully considered. It will consider that activities were delivered on time. Validating that LFA indicators are reached is part of the impact acknowledgment.



Sustainability

Sustainability refers to the likelihood of the continuation/maintenance of structures or initiatives created, or inputs distributed, during the project, beyond the lifetime of the project and is key to whether a project will achieve a wider and longer-term impact. Sustainability of a water and sanitation project is linked to the existence, dynamism, financial viability and technical knowledge of water committees. Those should not work in isolation but in close link with the referent ministry, and be officially registered. Sustainability of a project can be its capacity of disengagement from an authority (Water ministry) or a local partner (water and sanitation a local NGO programme). Replicability of activities is a component of programme sustainability.

Community, civil society and institutions strengthening

Crises often lead to a disintegration of communities. ACF-IN actions therefore seek to reinforce social organisation and cohesion through a communal approach to water management. Community mobilisation and participation during the project, as well as water-point committees, is a way of achieving this objective. It must be handled in a way that is both participative and democratic, thus allowing for the promotion of these values. As capacity building, institutional strengthening needs to be carefully considered.

⁹ Project Cycle Management

Transfer of knowledge and handover

From the onset of its implementation, the project must allow for a gradual withdrawal of aid, with total withdrawal as the final objective. From the beginning it is important to clarify the different roles of the communities, the traditional authorities and political actors. Specific attention is given to ownership, accessibility and management. Eventually the project will have to include an official handover of activities and infrastructure to a recognised and legitimate group. Technical training and maintenance groups are an essential aspect that must go together with the implementation of the project. There is a distinction between training aimed at making operation and maintenance teams self-reliant from a technical point of view, and training of users. Training is planned and carried out on-site, day-by-day, bringing together technicians, relevant institution's members (Water ministries members) and usercommittee members (treasurers, plumbers, etc.) in order to accumulate experience, publicise local successes, and allow all partners to benefit. Three key issues to sustainability of water structures created in the lifetime of the programme are: community ownership, availability of and access to spare parts and transparency in the management the structures.

Capitalising on experience and analysis

Implementing a project allows the gathering of a considerable amount of information, be it on the general context or on the methodologies and technologies employed. All this information is of great value to the communities, the local stakeholders and the various actors who may wish to operate in the area. Consequently, the collection, analysis and sharing of essential information is invariably an objective of any programme.

Operational research, link with Universities

In order to increase the pertinence of its technical activities or in order to find a proper answer to a technical (e.g. prospecting for drinking water in high arsenic context in Cambodia) and/or more general (e.g. social limiting factors to irrigation Tajikistan) problem, ACF-IN is open to implement operational research projects, and to promote short term studies, especially through student placements¹⁰. In any cases, relationships with universities and research institutes, ideally from the intervention country itself, as well as increasing professional relations between North and South universities, will be promoted.

¹⁰ When security context is ok and when the study fits the mission strategy

Cross cutting Issues

The technical response should keep into account transversal issues and inequalities throughout the project cycle. The following cross cutting issues are also key points that will contribute to coverage, impact, coherence, sustainability and appropriateness of the project.

Gender

The differing opinions and needs of women and men should always be considered at different stages of the project cycle.

The woman's role in water and sanitation provision, management and safeguarding is central and requires special attention. The word "gender" refers to the differing roles, responsibilities, needs, vulnerabilities, interests and capacities of both men and women, issues that are influenced by social and cultural factors. In most developing countries women are responsible for the domestic management and use of water. Within this role, women are responsible for looking after water sources, identifying their suitability for domestic and drinking purposes and calculating their water needs. Although they are responsible for domestic management, women are often excluded from water management at community level, being pushed out from the decision making over water.

The objective of ACF-IN regarding gender, is to ensure that the different programmes and projects implemented could benefit equally men and women according to their specific needs and with equal collaboration and equal participation of both sexes, attempting to balance existing gender relationships to make them more equitable, fair and with solidarity, redistribution of resources, participation and responsibilities among men and women.



During the project-definition phase, it is important to understand the role and status (specific vulnerability) of women within the community, as well as the part they could come to play within the project itself. Where possible, women should be employed for the hygiene promotion, sanitation, and watermanagement components of a project. As women are almost always responsible for children's education and housekeeping, their inclusion is a necessary element of the project. It is important to create space for women in planning and implementation, and to encourage their participation though capacity building. Women are involved in the community water and sanitation related decisions and therefore we should ensure that women are included as members of water committees, and they should also be represented in a balanced way in the water and sanitation team (especially in the hygiene promotion sector). Women are considered as a priority group when targeting interventions (e.g. widows, female-headed households).

People Living with HIV/AIDS

Reasonable access to safe water and sanitation is indispensable for people living with HIV/AIDS and for the provision of home-based care to AIDS patients. The importance of this is enhanced during a crisis situation, when the risk of opportunistic infections (diarrhoea and skin diseases are among the most common) is greater and health care support is often disrupted. HIV/ AIDS epidemics, by changing the social structures (more orphans, young people and elders) should modify the way the water and sanitation response is delivered (e.g. revision of access standards could be considered).

Elderly people

Elderly people make up a large proportion of the most vulnerable in disaster affected populations; they also have key contributions to make in survival and rehabilitation. The elderly may have restricted mobility, may not be able to carry water for long distances, or may be too weak to dig their own latrines or participate in other construction activities. Special consideration should be given to ensuring that the elderly receive an equitable service in spite of these limitations. Technical designs of facilities should consider this issue.

Disabled people

Disabled people are routinely excluded by water and sanitation projects, due primarily to external barriers (environment, infrastructure, and institutional practices) rather than disabled people's own limitations. Accessibility should always be considered in infrastructure projects from the outset of the planning and design stages.

Children

In crisis situations, children are particularly vulnerable and can often form a large part of the affected population. Special measures must be taken to ensure their equitable access to basic services. Particular emphasis should be given to children under five. The principal objective should be to contain mortality, morbidity and malnutrition below emergency thresholds.

Protection

Water and sanitation facilities should be made as safe and accessible as possible. Given that water plays a critical role in so many conflicts, it is imperative that aid organisations and individuals are mindful of human rights and protection issues when implementing water and sanitation projects, as well as how the security situation may affect an intervention. For example, a simple intervention such as installing water points, if not designed and managed appropriately, can inadvertently provide resources or leverage for armed groups and so further fuel a water-related conflict.

Respect for the environment

During each intervention, the environmental risks are assessed and the impact is minimised. In every case, ACF-IN aims to sensitise the affected communities and other local stakeholder about the proper management of their water resources and the environmental risk factors. It is particularly important to avoid the over-exploitation of aguifers: during the implementation of drilling or well-digging programmes, the available resources must be systematically assessed (through geophysical studies, pumping tests, etc.). This helps determine the number of water points and appropriately size the pumping systems chosen. Gathering meteorological information is also essential. If there is a risk of exhausting underground water resources, alternative resources must be considered.

Public/Private sector participation

Depending on the location and the nature of an operation, the public / private sector can potentially provide essential products (e.g. water purification equipment) and practical solutions (e.g. logistical and engineering support) faster or more cost-effectively than relief agencies. Working through partnerships and contracting with those sectors is also a way to consolidate local economy and to avoid dependency and substitution.

However, competition and political interests may lead to practices which can be both to the benefit and detriment of humanitarian aid. In some cases, the public structures are also not able to respond the demand or the private sector is only covering the communities from whom they can get benefit. Increasingly, private sector operators are becoming involved in urban water provision, although in situations associated with force majeure events (such as natural disasters, civil disturbances, etc) responsibility is still most often borne by the regulating authority (i.e. the government).

When such events do occur, humanitarian agencies need to position themselves clearly, and decide which is / are the most appropriate way / partner to implement properly the project and deliver assistance. ACF-IN position regarding the private/public sector is to guarantee that the most vulnerable people are reached and to insure a fair regulation (e.g.: through subsidies) to guarantee the water and sanitation coverage.

ANNEXES

Annex 1: Typology of Humanitarian Contexts

Millions of people in the world find themselves in situations of crisis (displaced populations, marginalized populations, victims of conflict, etc.). As a consequence, entire communities live in a state of extreme vulnerability and their survival is constantly threatened. Humanitarian programmes are implemented in situations where human dignity is not respected and where basic needs are not met. ACF-IN distinguishes five types of problem that may classically lead to humanitarian situations and that warrant intervention:

Open conflicts:

this refers to any conflict (civil war, armed conflict between countries, etc.) which has a strong impact on the way of life of populations and which jeopardizes their survival. The main consequences of such conflicts are: physical insecurity and persecution;

- the disintegration of state structures and services (electricity, sanitary infrastructures, hospitals, etc.);
- the sudden loss of means of subsistence/livelihoods (commercial exchanges, market access, agricultural
- the weakening of internal mechanisms of regulation;
- the displacement of populations inside and/or outside of the country.

Natural disasters:

this refers to the occurrence of any natural phenomenon which jeopardises the lives of populations. These phenomena can be sudden (e.g. earthquake or flood) or gradual (e.g. drought). Some disasters are foreseeable (e.g. hurricanes), others are completely unpredictable (e.g. earthquakes). Consequences are:

- the sudden loss of means of subsistence/livelihoods (commercial exchanges, market access, agricultural activities, sanitary infrastructures, etc.);
- the weakening of internal mechanisms of regulation;
- the displacement of populations inside and/or outside of the country.

Post-crisis:

this refers to the time period following a serious crisis, be it man-made or natural. The populations affected are no longer subject to the immediate threats of the crisis, but must now deal with the resulting consequences and challenges: returning home after having been displaced, recovering lost goods and means of production, etc. The powers in place are often unable (or unwilling) to help people recover their self-reliance, and must face their own problems of restructuring.

De-structuration:

a country is in a state of destruct ration when there is no officially recognized government, or when the government does not meet its responsibilities towards the population. This can be due to a lack of capacity (financial, structural, legitimacy issues, etc.) within the state apparatus, or because of specific political actors who are either too uninterested or too self-seeking to bring the state's capacity to bear. At the same time, the international community doesn't recognise the absence of a state and act accordingly. As a consequence, people are left to themselves. When such is the case, violence usually becomes widespread and social services (construction, maintenance, management of sanitary infrastructure, etc.) are at a minimum. In many cases state disintegration leads to community disintegration that prevents people from coping with their traditional means.

Discrimination:

this refers to a country where communities or sections of the population suffer from discrimination along social, cultural, ethnic, religious or racial lines. This discrimination can be the result of policies (active or passive) implemented by a government (usually a strong state) but also by communities or groups themselves. The consequences for people discriminated against can be many:

- physical and moral persecution (e.g. forced displacement);
- blockage of internal mechanisms of regulation;
- exclusion from all types of development policy.

Annex 2: Humanitarian Situations and Their Evolutions

Not all the situations described above lead to humanitarian crises, and the consequences of a disaster or of a context favourable to crisis depend on the type and level of vulnerability of the affected populations. These conditions determine the severity and impact of each event. For example, hurricanes of the same intensity will cause much greater loss and more damage in Central America than in Florida, principally due to the weakness of preparedness policies and local capacities in Central American countries. In another example, the year following the Iraqi war in 2003 did not lead to an acute humanitarian crisis as previously feared. The level of development and internal structure of the country before the conflict allowed it to deal with the losses of the state and with local con-

Analysis of the situation allows consideration of threats and vulnerabilities that may lead to a crisis and therefore decision on, and design of, an intervention.

Crisis situations are usually complex and characterised by the interaction of various factors: natural catastrophes and/or human conflicts are added to various socio-economic and structural problems. The resulting compounded effects are often of the greatest magnitude. A crisis can initially arise from a sudden (quick-onset) occurrence (e.g. war, flooding) or via a slow and gradual (slow-onset) process (e.g. economic disruption or drought). Following its original manifestation, a crisis can then further evolve according to two possible models as explained below.

If a crisis consists of a single event, once that event is over and the more urgent needs are covered, one can move on directly from an emergency phase to a recovery phase. In such a case, the aim is to return to a state of normalcy similar to that prior to the crisis. This is called the continuum model, and it has traditionally been used in the humanitarian community to describe the linear evolution of a crisis and response mechanisms corresponding to each phase: emergency, rehabilitation and development once the situation has recovered. These phases are reflected in the strategies and policies of many humanitarian organisations (donors and NGOs).

Annex 3: ACF-IN Mechanisms of Response

The mechanisms of response are various and the strategy of any intervention includes several different kinds of response. Nevertheless, these responses can be classified as follows:

Emergency responses:

The main objective is to guarantee the *survival* of people facing a crisis, meeting basic needs (i.e. the most urgent). The response must be swift and effective, focusing on short-term vulnerability reduction. Typically, following an emergency response, the general situation will still be fragile, and a strong dependency on outside help will exist. Emergency responses are mainly appropriate in cases of open conflicts and natural disasters.

Capacity-building and rehabilitation responses:

The main objective is to help provide or restore people's livelihood and reduce dependence on external aid. Such interventions focus on the rehabilitation of social structures as well as the rehabilitation of infrastructure. In many cases, simply repairing material and social damage is not sufficient, as conditions prior to the disaster were not adequate. The response mechanisms need to be adapted to more self-reliant models and focus their objectives on the improvement of basic living conditions and the reduction of the major vulnerabilities faced in the medium term. This is achieved by providing a complete coverage of needs via self-reliant systems and so implies the participation and the empowerment of local structures and communities, as well as national institutions, in order to guarantee sustainability. They are appropriate where the situation is still fragile but where there is not as great a threat to life as in post-crisis, de-structuration or discrimination situations.

Long-term interventions:

This focus on structural problems and the principal objective is the reinforcement of the existing local capacity, with the goal of improving the living conditions of the communities in a sustainable way, and respect for their rights. The participation of the communities concerned, in the definition and implementation of programmes, is central to this approach. These programmes focus on the reduction of vulnerability in the long term. External support is kept to a minimum, and implementation is mainly done through local partners. These responses are appropriate in cases of post-crisis, de-structuration and discrimination.

Disaster-preparedness and risk-management programmes:

These seek to reduce the impact of disasters through reducing communities' vulnerabilities and reinforcing their capacity for response. It includes:

- Prevention: measures and actions to avoid or remove risk (e.g. soil conservation, dam construction and earthquake-proof constructions);
- Mitigation: measures and actions to reduce or decrease risk; increasing the capacities of communities and decreasing their vulnerabilities (e.g.: institutional capacity-building, disaster education and awareness raising, legislation and planning, etc.);
- Preparedness: measures for planning, organising and facilitating warning systems, search and rescue, emergency response and rehabilitation in case of disaster; strengthening the capacity of local actors to respond to disasters (e.g. community contingency plans).

Disaster preparedness is appropriate when vulnerability is high and a strong likelihood of disaster exists. It can form part of emergency, rehabilitation and development interventions, but has a long term approach.

Note: in principal, the affected population should always be closely involved in the assistance activities.

For a few years, ACF-IN has carried out programmes of reduction and prevention of the natural risks. The purpose of these programmes set up in zones regularly affected by floods is to establish on the scale of the touched communities early alarm systems. If the authorities in place often have in these zones systems of forecast of the floods and alarm, the latter are badly understood by the communities, themselves badly informed and little implied in these projects. It is the implication of the populations which will guarantee the system effectiveness, disaster responses attempts to be built on local capacities.

The main objectives for interventions in support of DP are to mitigate the impacts of a (recurrent) disaster event on access to adequate levels of water and sanitation service, and to reduce the likelihood of increased incidence of water and excreta-related disease, both during and following the disaster itself.

Annex 4: ACF-IN Sector's Intervention Domains and Activities

Note that each domain and their related activities are susceptible to be linked with research developed internally or with partners (Universities, Research Institutes, and Consultants).

Domains	Activities
Context analysis and studies	Socio-economic studies related to water
	KAP surveys
	Evaluation of existing and potential water resources
	Search for new water resources
Water supply	Construction / rehabilitation of water points:
	 Open wells
	 Boreholes
	 Springs
	 River / lake catchment
	 Rainwater catchments and ponds
	Conservation of water sources:
	 Reforestation
	Systems for agriculture (irrigation) and livestock
	Installation of water-extraction systems:
	 Manual (e.g. rope and bucket)
	- Gravity
	- Hand pumps
	 Motorised pumps
	- Solar systems
	Water-quality analysis and monitoring
	Water treatment
	Distribution and storage
Excreta disposal	Promotion of excreta disposal
'	 Construction/rehabilitation of latrines
	 Composting
	 Sewerage systems
	 Sewage treatment
Run-off and wastewater disposal	Drainage systems
·	Protection of banks
	Wastewater drainage and treatment
Solid waste management	Solid waste awareness
	Refuse pits
	Refuse collection
	Recycling
	Medical waste management
Vector control	Risk analysis
	Vector-related hygiene awareness
	Mosquito-net distribution
	Insecticides, rodenticides and disinfection
	Fly traps

Domains	Activities
Hygiene & environmental promotion	Construction / rehabilitation of hygiene structures - Showers - Laundry areas - Hand-washing facilitie Hygiene kits distribution Hygiene promotion - Basic hygiene habits - Use of water - Proper use of latrines - Hygiene and food
Knowledge transfer and training Local Capacity Building	Strengthening of local structures and training Water and sanitation committees set-up Data collection and transfer of information Water policy development
Risk management	Prevention Mitigation Preparedness

Annex 5: The Concept of Vulnerability

Vulnerability concerns the fragility of a group / person in an adverse context. The key elements that define the degree of vulnerability are the exposure to risks and the capacity to cope with these risks.

Globally, the level of vulnerability of a household/individual is determined by the risk of failure of the coping and reaction strategies when faced by a crisis. Vulnerability of a household can thus be defined as an imbalance between the resources required and those available, and an insufficiency of 'capital' assets to respond to a situation. It refers to the entire range of factors that place people in danger, the degree of vulnerability for an individual, a household, or a group of people being determined by their exposure to risk factors and by their ability to confront crisis situations and to survive them.

For a given household, population or region, this means the combination of:

- The exposure to different hazards or events placing the population at risk
- And the potential capacities / coping mechanisms which could be applied to face that risk, anticipate it, resist it, and recover

The crises/events to which populations are exposed are the circumstances and the conditions over which they have no direct control and which present a risk to their normal functioning. They could be climatic or environmental disasters (earthquakes, floods, droughts, etc.), poverty (leading to risky life conditions: precarious housing, poor diet, unsanitary conditions, limited access to education, etc.), or social or political conflict (war, moral prejudice, racism, ethnic tension, dictatorship, etc.). Like capacities, vulnerabilities can be distinguished according to their physical, social, mental, or spiritual characteristics.

Vulnerability often also involves the degradation of the social and/or natural environment: frequently, vulnerable homes can no longer manage a balance between basic needs over the short term (survival) and their means of existence (livelihood) over the long term.

Annex 6: The ACF-IN Charter

Action Against Hunger is a non-governmental, non-political, non-religious, non-profit organisation. It was established in France in 1979 to deliver aid in countries throughout the world. The aim of Action Against Hunger is to save lives by combating hunger and diseases that threaten the lives of vulnerable children, women, and men.

Action Against Hunger intervenes in the following situations:

- in natural or man-made disasters that threaten food security or that result in famine;
- in situations of social/economic breakdown, linked to internal or external circumstances that place groups of people in extremely vulnerable positions;
- in situations where survival depends on humanitarian aid.

Action Against Hunger brings assistance either during the crisis itself through emergency interventions, or afterwards through rehabilitation and sustainable development programmes. Action Against Hunger also intervenes to prevent certain high-risk situations.

The goal of all Action Against Hunger programmes is to enable beneficiaries to regain their autonomy and selfsufficiency as quickly as possible.

Whilst carrying out its activities, Action Against Hunger respects the following principles:

Independence Neutrality Non discrimination Free and direct access to victims Professionalism Transparency

All members of Action Against Hunger worldwide adhere to the principles of the charter and comply with them in their work.

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