

TIER 2 INDICATOR TECHNICAL NOTE

NUMBER OF PEOPLE USING:

A) BASIC OR SAFELY MANAGED DRINKING WATER SERVICES B) BASIC OR SAFELY MANAGED SANITATION SERVICES AND/OR A HANDWASHING FACILITY WITH SOAP AND WATER.

Last updated: February 2024

DEFINITION

This indicator tracks the number of people directly supported by Australia's development assistance and use:

- a) basic or safely managed drinking water services
- b) basic or safely managed sanitation services and/or a handwashing facility with soap and water.

Definitions for basic or safely managed drinking water, sanitation and hygiene (WASH) services used in this indicator have been adopted from WHO and UNICEF Joint Monitoring Program (JMP) for Water Supply and Sanitation (JMP 2023):

- > Drinking water
 - Safely managed: Drinking water from an improved source that is accessible on premises, available when needed and free from faecal and priority chemical contamination.
 - **Basic**: Drinking water from an improved source, provided collection time is not more than 30 minutes for a round trip, including queuing.
- Sanitation and hygiene
 - **Safely managed:** Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or removed and treated off-site.
 - **Basic sanitation**: Use of improved facilities that are not shared with other households.
 - Basic hygiene: Handwashing facility with soap and water at home.

Note: According to the latest JMP reports (2023), our neighbouring Oceania region, lacks even basic drinking water and sanitation services (only 60 per cent of people have access to basic drinking water and 33 per cent people to basic sanitation). The Sustainable Development Goal (SDG) 6 target is the provision of *safely managed* drinking water and sanitation. However, given the large percentage of countries in the Oceania region which still do not have even basic drinking water and sanitation services, this indicator will capture basic and safely managed drinking water and sanitation.

SCOPE

INCLUDES:

- Drinking water: This indicator measures the increased number of people with access to safely managed or basic drinking water in line with global WHO/UNICEF JMP definitions as mentioned above.
- Sanitation: This indicator also measures the increased number of people with access to safely managed or basic sanitation in line with global WHO/UNICEF JMP definitions as mentioned above.
- **Hygiene:** This indicator also measures the increased number of people using handwashing facility with soap and water.

EXCLUDES:

- WASH facilities, either basic or safely managed, in schools and health centres as this indicator only measures increased household access.
- Access in public toilets or public drinking water points.
- Access to limited or unimproved access to drinking water or sanitation services.
- Where there is support for provision of chemicals, system upgrading, or implementation of water quality monitoring. However, these activities should be reported as a qualitative case study, as they contribute to the overall indicator of people benefitting from improved level of service.

CALCULATION METHOD

This indicator is designed to count all people benefitting from Australian funding under an investment. Where only household data is available, this should be converted to individuals using the number of persons per household. Ideally the conversion factor should be specific to the area covered by the investment, but if it is not available, census data on the number of persons per household at the provincial, state, or national level can be used in that order of preference. The number of households should be referenced in the calculation methodology.

Australian support for WASH activities may be provided along with other donors. In some cases, monitoring and evaluation systems collect data in a way that allows attribution of results to individual donors. Where this is not the case, a simple proportion method can be used to calculate Australia's pro rata share of results. For example, if Australia provides 40 per cent of the total program funding, 40 per cent of the results can be reported.

Where the reported result combines activities from more than one implementing partner, care should be taken to ensure a consistent household-to-individuals conversion rate is used for results reported by all implementing partners considered under this investment.

DATA SOURCES

Progress reports and annual reports from investment implementing partners. Other data sources can include mid-term reviews, final evaluations, and partner country Management Information Systems (MIS) which are used to monitor WASH data.

DISAGGREGATION

Where applicable, include gender and disability-disaggregated data as follows:

- Number of women/girls
- Number of men/boys
- Number of people of other genders
- Number of people where sex is unknown
- Number of people with disabilities (gender disaggregated).

WORKED EXAMPLES

- **Example 1:** In Country X, Australia is partnering with an NGO for provision of safe drinking water to 10,000 people in five districts. Australia is the only donor. Australia's share of the results in the reporting year will be 100 per cent of program participants (10,000 people).
- Example 2: In Country Y, Australia is partnering with a multilateral organisation, who is working in two states to provide safe drinking water to 100,000 people. The investment value is \$20 million. There are two donors: Australia is contributing \$5 million and other donors are contributing \$15 million. Australia's pro rata share of the results is 25 per cent of the program participants (25,000 people).
- Example 3: In Country Z, the host government and various donors are supporting a WASH program (total budget: \$10 million; Australia's contribution is \$1 million). In the reporting year, 500,000 people gained access to basic sanitation and handwashing facilities. As Australia is providing 10 per cent of the funding, Australia's share of the results is 50,000 people.