

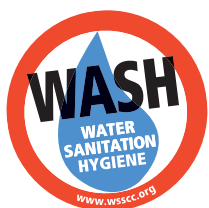


TEARFUND

## Making every drop count



## Financing water, sanitation and hygiene in Sierra Leone



Water, Sanitation and Hygiene for all

# Acknowledgements

**The Water Supply and Sanitation Collaborative Council** is a leading international organisation that enhances collaboration in the water supply and sanitation sector. Its aim is to accelerate the achievement of sustainable water, sanitation and waste management services to all people, with special attention to the unserved poor, by enhancing collaboration among developing countries and external support agencies and through concerted action programmes.

**Tearfund** is an evangelical Christian relief and development agency working with local partners to bring help and hope to communities in over 70 countries around the world. Many of our partners work on water, sanitation and hygiene promotion projects. Through our advocacy work, we hope to raise awareness of the current global water and sanitation crisis with our supporters, and policy makers, and build the capacity of our partners to advocate on water issues on behalf of the poor.

Research and writing: Naomi Foxwood

Comments and guidance: Andy Atkins (Tearfund), Joanne Green (Tearfund), Tirza Kouwenberg (WSSCC), Cecilia Martinsen (WSSCC)

Cover photos: Jim Loring

©Tearfund 2005

With many thanks for the generous co-operation of all those who were interviewed for this paper, and those who gave verbal or written comments.

## Commonly-used abbreviations

GoSL	Government of Sierra Leone
GVWC	Guma Valley Water Company
INGO	International Non-Governmental Organisation
MoDEP	Ministry of Development and Economic Planning
MoHS	Ministry of Health and Sanitation
PRSP	Poverty Reduction Strategy Paper
Salwaco	Sierra Leone Water Company
WaSH	Water, sanitation and hygiene
WSD	Water Services Division

# Contents

	<b>Introduction</b>	<b>2</b>
<b>1</b>	<b>WaSH in Sierra Leone – background</b>	<b>4</b>
1.1	Coverage	4
1.2	WaSH as compared to other sectors	5
1.3	Sector characteristics	6
<b>2</b>	<b>WaSH in Sierra Leone – the finances</b>	<b>8</b>
2.1	Financing into the sector	8
2.2	Is this financing adequate?	9
2.3	Where the financing is spent	10
2.4	WaSH financing in the future	11
<b>3</b>	<b>Areas to be addressed if current sector financing is to be made more effective</b>	<b>12</b>
3.1	Wide-scale corruption denies money to basic services	12
3.2	The work of Ministry of Health and Sanitation is made less effective by externally-imposed financial bureaucracy	13
3.3	Insufficient regulation of the water parastatals	13
3.4	Lack of participation in Salwaco policy-making resulting in stakeholder disagreements	14
3.5	Poor cost recovery	15
3.6	Poor line ministry coordination	17
<b>4</b>	<b>Ways in which current sector financing is being made more effective</b>	<b>18</b>
4.1	Improving the accountability of service providers	18
4.2	Public Expenditure Tracking Surveys	19
4.3	Recognising the importance of software and integrating it at local level	20
4.4	Tackling the problem of operation and maintenance	21
4.5	Learning lessons from the past	22
<b>5</b>	<b>Conclusions and recommendations</b>	<b>23</b>

# Introduction

The next few years are immensely important ones for Sierra Leone: the struggle to meet the MDG targets will be won or lost because of decisions taken now. During the conflict in Sierra Leone, 2 million people were displaced, infrastructure was almost completely destroyed in some areas, and GDP halved. The country is bottom of the UNDP Human Development Index and suffers infant and child mortality rates that are 'perhaps the highest in the world' (I-PRSP).<sup>1</sup> But, the rebuilding process has started and the action taken now will shape the future of the country.

Water, sanitation, and the work of hygiene promotion were, of course, badly hit by the war. Coverage in 2003 was estimated at 22 per cent for water, which gives Sierra Leone the dubious distinction of having possibly the lowest coverage in the world. Sanitation coverage is equally low, at about 15 per cent and the water-related disease burden is overwhelming. 'Almost all the diseases we die from have some water relatedness', states Dr Kamara, the Head of Planning at the Ministry of Health and Sanitation.

And this is part of the reason why water, sanitation and hygiene promotion is key to development and the alleviation of poverty in Sierra Leone. If the MDG water and sanitation targets are met, the chances for meeting other targets will significantly increase; with girls freed up to go to school, people able to work rather than stay home with diarrhoea, and more infants seeing their fifth birthday. When asked in a 2004 Participatory Poverty Assessment about what keeps them poor, both men and women in Sierra Leone named sickness and ill health as the primary reason. A large proportion of this sickness and ill health is due to unsafe water and inadequate sanitation and hygiene. Is the international community and the Government of Sierra Leone willing to respond to the poverty priorities of poor people in Sierra Leone and finance increased access to safe water and sanitation?

Currently, of all the finances going into Sierra Leone, the water and sanitation sector does not see its fair share. Of the donors, the two biggest bi-laterals don't address the sector. For government funding, other sectors are prioritised more (the road fund, for example, receives more than water from public funds). This low priority of WASH for financing needs to be addressed. But it must also be recognised that donors and governments are making difficult decisions as to where to put a finite amount of funding: Sierra Leone needs more money with which to play.

External help is needed. There is a short but important window in which post-conflict states can absorb twice as much aid as comparable countries at peace. Yet, in 2003, aid reduced considerably from 2002 and 2001 levels. Equally important, financially, for Sierra Leone, is a reduction in debt servicing which currently stands at 2.9 per cent of GDP<sup>2</sup>, and an increase in trade opportunities such as a removal of the tariffs that the EU and US place on the agricultural products that make up about 50 per cent of Sierra Leone's exports. These trade and debt changes would substantially increase the meagre resources currently available for the Sierra Leone Government to use to deliver essential public services.

Should Sierra Leone gain more money for poverty reduction, then the outcomes could be exciting. There have been grave problems with transparency and accountability issues in the delivery of public services in Sierra Leone, corruption has been wide-spread, with

<sup>1</sup> *Multiple Indicator Cluster Survey 2* (2000) for 1998.

<sup>2</sup> Figures for 2002. *Human Development Report*, UNDP.

neither government nor donors doing enough to combat it. But the Government of Sierra Leone is starting to address these with more transparent budgeting procedures and Public Expenditure Tracking. A new national water and sanitation strategy is in the consultation stage, which should address current problems concerning a lack of effective regulation and coordination. Political commitments have been made to increase government funding, and a number of multi-lateral donors plan more funding for the sector.

The sector made big gains during the 1980's International Decade of Drinking Water Supply and Sanitation, and lessons learnt there are being put to good use in drawing up a strategy for the next UN decade on water and sanitation. The next UN decade ends in 2015, and hopefully in the meeting of the MDG water related targets in Sierra Leone.

**'Why shouldn't we be really ambitious about the target? We must do all we can and use it as a spur to all sector stakeholders. After the calamity of the war, there is now a groundswell of support and desire to do it right this time.'**

Dr Kamara, Head of Planning,  
Ministry of Health and Sanitation,  
Sierra Leone

# 1 WaSH in Sierra Leone – background

## 1.1 Coverage

The Ministry of Health and Sanitation estimate that as of 2003 coverage stood at: 22 per cent for access to safe water, and 15 per cent for access to appropriate sanitation. This probably puts Sierra Leone in the position of having the lowest access to safe water in the world (although inaccurate data makes it impossible to be completely sure). These figures are widely held to be the most recent and accurate we have. If these figures are correct then it is likely that despite their low nature, they are quite an improvement to the state of coverage at the worst of the war.

The conflict that ravaged Sierra Leone for a decade resulted not only in terrible loss of life and displacement, it destroyed a great deal of infrastructure. In 1999 coverage was estimated at 15 per cent for water and just 5 per cent for sanitation.<sup>3</sup>

When visiting communities near Kambia in the north of the country, we asked why they were continuing to take dirty water from the river, when they had a number of shallow wells with buckets that had seemingly not been destroyed in the conflict. We were told that rebels had dumped dead bodies in the wells and so they were unusable. It was certainly the case that rebels dumped bodies in very many wells, but even where this hasn't happened the traumatised community can't be sure and understandably are reluctant to use wells that are not completely new.

Sierra Leone lost not just infrastructure but people. Some health and water professionals were killed during the conflict, and many others fled the country. During the war the Ministry of Health lost 70 per cent of their staff overseas.<sup>4</sup> The only trained sanitary engineer in the Ministry of Health recently succumbed to a stroke, which has been attributed to exhaustion. The toll on those who are left working in Sierra Leone is very great.

**Table 1**  
Facilities destroyed or heavily damaged during the conflict – two districts<sup>5</sup>

	Kambia	Kono
Health centres	50%	50%
Wells and other water points	30%	90%
Sanitation facilities	65%	90%

Obtaining accurate data in Sierra Leone is a problem, whether it be financial data or statistics on coverage of services.<sup>6</sup> The following huge disparities in estimates of coverage show how difficult it is to use these figures for analysis. Most people who work in the sector in Sierra Leone suspect all the above figures to be inaccurately high.

<sup>3</sup> Statistics Sierra Leone, [www.statistics-sierra-leone.org](http://www.statistics-sierra-leone.org)  
Official governmental statistical body.

<sup>4</sup> Verbal estimate, Ministry of Health.

<sup>5</sup> NRC District assessment  
July/November 2001.

<sup>6</sup> Statistics Sierra Leone was set up in 2001 to address this problem.

Percentage of population with access to safe water and sanitation				
Facility	Statistics Sierra Leone	WHO / JMP	Human Development Report	Baseline Service Delivery Survey
Safe water	18% (15% <sup>1</sup> )	28%	57%	35%
Sanitation	63% (5% <sup>2</sup> )	28%	66%	20%

**Table 2**  
Coverage of WatSan in Sierra Leone, 2000: wildly varying estimates

- 1 Government estimate in 1999.
- 2 Government estimate in 1999. It is unlikely that such a massive gain was made in one year.

## 1.2 WaSH as compared to other sectors

Anyone familiar with the sector will not be surprised that water and sanitation lose out in the allocation of public resources in Sierra Leone; it is a common story.

	Primary Health Care <sup>1</sup>	Education: pre-primary and primary	Water Services (predominantly grant to Salwaco)	Road Fund
% allocated	3.87	6.36	1.51	3.41
Actual amount (million Leones )	8,517.5	14,013.6	3,321.4	7,512.0

**Table 3**  
Spending by sector as percentage of total recurrent expenditure in FY2003 budget

- 1 Of which sanitation and hygiene promotion spending is a significant part.

The fact that the road fund receives more than twice as much as water services nationally is not an unusual situation amongst African countries. Sierra Leone has in place a budget oversight process that encourages participation from communities in the budget process. Unfortunately, in this case, the process did not provoke those who make budget allocations to respond to the stated priorities of the people of Sierra Leone. As we can see below, infrastructure – a primary example being roads – is bottom on the list of priorities as identified by both men and women, whereas health rates second highest as a concern for women, and fourth for men. The primary cause of ill health in Sierra Leone is unsafe water, and a lack of appropriate sanitation and hygiene.<sup>7</sup>

**‘Almost all the diseases we die from have some water-relatedness.’**

Dr Kamara, Head of Planning,  
Ministry of Health and Sanitation

WaSH is not only losing out to other sectors when competing for public funding, but also when it comes to donor allocations. Despite the links between WaSH progress, and the attainment of other MDGs such as infant mortality, education, and economic productivity, no bi-lateral donors have substantial WatSan programmes in Sierra Leone. The British Department for International Development and American USAID give a great deal of funding to Sierra Leone, but fund no work in water. DfID has been leading the support to the Government of Sierra Leone in governance and transparency issues. Better governance

<sup>7</sup> Ministry of Health and Sanitation, 2004



and transparency will undoubtedly be of benefit to the water sector in the medium to long term, but immediate and direct funding is also necessary from some donor source, but currently lacking. NGOs plug this funding gap in the sector where they can.

Top priorities ranked through Participatory Poverty Assessments in 2004

	Men	Women
1	Education	Education
2	Agriculture	Health
3	Good governance	Agriculture
4	Health	Good governance
5	Infrastructure	Infrastructure

### 1.3 Sector characteristics

**Water** There is currently no national policy on water

**Urban** To serve Freetown, the Guma Valley Water Company (GVWC) was established by an ordinance in 1961. As originally conceived, GVWC would be able to supply Freetown with its water needs up to 90 per cent on a commercial basis. In 1983, according to World Bank estimates, a population of about 350,000 inhabitants were provided with pipeborne safe drinking water.

Guma Valley finds itself working under very different circumstances today. Freetown has increased in size substantially since the war – the number of urban poor is estimated to have doubled between 1992 and 2002<sup>8</sup>. Only approximately 45 per cent of Greater Freetown now has some form of reliable water. The current water plant at the Guma dam is no longer capable of meeting the massive demand for water (the 2.3 million gallons daily). Informal settlements are not on the piped system, and cannot be ‘because, due to its autonomy, the company’s activities are concentrated on viable communities within its area of jurisdiction only. This automatically excludes its services from disadvantaged communities within the municipality of Greater Freetown, which are normally considered non-viable.’<sup>9</sup> Some of these communities have benefited from some NGO driven gravity-flow schemes and wells, but some plan of action is needed to address the remainder.

Smaller urban areas are mainly serviced by gravity-fed systems, a few by piped water, others by groundwater. Bo, Lungi, Kenema, and Makeni were recently rehabilitated with World Bank money through the Sierra Leone Water Company.

**Rural** The Water Services Division was created in 1963 under the ‘Water Control Act’, and it sits under the authority of the Ministry of Energy and Power. This body was responsible for the provision of rural water supply until the GoSL requested a survey on the post-war sector situation from the World Health Organisation and World Bank. The results of the survey showed that water supply was not being well served by the current

<sup>8</sup> Project Performance Assessment, Report No 29308, World Bank, 08/06/04.

<sup>9</sup> Draft water sector review for the PRSP, May 2004, Ndomahina and Kabia.



system. The Government, therefore, accepted the recommendations of the WHO and World Bank, and in 2001 set up Salwaco, a parastatal company. The company was to be responsible for the rural implementation.

Although under its ordinance the Water Services Division still has responsibilities for rural water policy and regulation, in practice, it seems the Division has ceded these responsibilities to Salwaco. The rural water supply sector is still in a poor state, and has probably only been kept on its feet through support from external support agencies and NGOs. External revenues were over seven times internal revenues in rural water supply financing in 2000 (see [TABLE 4](#), page 8).

**Sanitation** There is a comprehensive national environmental health policy as an addendum to the national health policy; it has been published and disseminated

**Urban** It is unclear whether the Ministry of Health and Sanitation or the City Council of Freetown are ultimately in charge of sanitation in the capital. The situation is dire, particularly in the poorer, more recently settled, parts of the city. Open defecation is rife. There are public toilets and washrooms in some older slum areas, but they are under-used due to poor maintenance and because they do not have a regular supply of running water.

**Rural** Health care provision is decentralised. District environmental health offices are primarily responsible for overseeing water quality and environmental sanitation. Communities are often aware of the importance of WaSH, due to effective district offices and the focus on software during the International Decade on Drinking Water. As many facilities were destroyed in the war, some districts are in the position of having the software component of WaSH in place, but not the hardware.

## 2 WaSH in Sierra Leone – the finances

### 2.1 Financing into the sector

An accurate assessment of financial flows remains difficult while transparency issues go unchecked. The Government of Sierra Leone is aware of the problem.

Deputy Minister of Development and Economic Planning<sup>10</sup>

**'In particular, the recording of revenues and expenditures at ministries and agencies and facilities remains poor.'**

As **TABLE 4** confirms, 'the history of the sector financing clearly shows its heavy dependence upon foreign aid provided either as grants or loans by governments and international financial institutions among others.' (*Draft Water Sector Review*)<sup>11</sup>

Currently the proportion of aid flowing through budget support mechanisms, as opposed to donors directly implementing off-budget, isn't as high as in many other countries. The World Bank, like many other donors, is hoping to increase the amounts given through budgetary support but currently feels that the fiduciary situation of the Government of Sierra Leone is not yet of a sufficiently high standard to allow this. This may change fairly quickly, as the Government of Sierra Leone is addressing fiduciary issues: national procurement laws and financial management laws are being formulated, and the entire financial management system will be computerised for the first time in the near future.

**Table 4**  
**Sources of investment**  
**(US\$ 1,000) year 2000**  
Water Supply and Sanitation Assessment  
WHO 2002

Service area	National funds	External funds	Total
Urban water	950	3,600	4,550
Rural water	1,000	6,500	7,500
Urban sanitation	400	2,500	2,900
Rural sanitation	350	1,500	1,850
Total	2,700	14,100	16,800

#### Public funding: water, sanitation and hygiene

In more recent years, public financing has picked up slightly. In 2004, according to the Government Budget for the year 2003, the Government of Sierra Leone allocated US\$ 1,423,177 (3,493.9 millions Leone) to Salwaco. It is worth noting though that Salwaco in their brief explanatory note on the budget states 'total amount provided for the operations of Salwaco under the fiscal year 2004 is a sum total of millions Leone 2,963,400,000' (US\$ 1,207,087). The reason for this discrepancy is not clear.

As regards public funding to sanitation and hygiene, in 2004 US\$ 577,393 (1,417.5 millions Leone) went to the Environmental Health (Sanitation Division) Division of the Ministry of Health in from the Government of Sierra Leone.

<sup>10</sup> Status Report on Sierra Leone at Forum on the MDGs in Dakar, Senegal, Feb 2003.

<sup>11</sup> Draft water sector review for the PRSP, May 2004, Ndomahina and Kabia.

### Donor funding: water

A number of big donor projects are under way, or being planned, in the water sector, but it is multi-lateral donors rather than bi-laterals who are active.

- The World Bank has a Water and Power project, in the form of a loan for Guma Valley Water Company. It comprises \$15.33 million for water supply, sanitation and solid waste management, although \$1 million of this is for hiring reform consultants for GVWC. This is the latest in a steady flow of World Bank projects in water and sanitation in Sierra Leone.
- The Islamic Development Bank is also a significant support to the sector, covering Kailahum, Kenema, Kono and Tonkolili Districts. with an estimated US\$ 4.8 million, in loan form.
- The African Development Bank has committed a grant for a feasibility study. This may well be followed by substantial funding for Rural Water Supply and Sanitation to meet the MDGs.

### Donor funding: sanitation and hygiene

When donor monies are added to the public funding for Environmental Health in 2004 the planned expenditure is 3,506.9 millions Leone (US\$ 1,428,472), which means that roughly 2 million Leones, (US\$ 800,000) was expected to come from donors. The main donors were the EU, WHO, World Bank, and Unicef, who funded discreet parts of the Public Health budget. Again, it is noticeable, that it is multi-lateral rather than bi-lateral donors who actively support sanitation and hygiene in Sierra Leone.

### NGO funding

Certainly, the financial support of International NGOs to Sierra Leone is substantial, reaching about \$53 million to all sectors.<sup>12</sup> While sectoral figures for NGO support given to sanitation and water services are unavailable, it is fair to say that their contribution was vital in the delivery of services, particularly during the war. The Ministry of Health recognised this, writing in 2002 that many 'District Health Personnel, ... have functioned mostly due to the support from international NGOs'<sup>13</sup>.

## 2.2 Is this financing adequate?

Approximately 4.5 million of the estimated 5.4 million people in Sierra Leone live outside of Freetown.<sup>14</sup> Bearing in mind, then, that Salwaco has about US\$ 1.2 million to serve these 4.5 million people, each person in rural and small town areas of Sierra Leone has approximately 33 cents spent on their water provision by the government, and donors who give to the line ministry. NGO and off-budget donor money would bump up this

<sup>12</sup> United Nations OCHA Situation Report 24th March 2003.

<sup>13</sup> Report No PID10711, regarding Sierra Leone Health sector reconstruction and development, World Bank, World Bank approval 20th February 2003.

<sup>14</sup> <http://www.unhabitat.org/habredd/conditions/wafrica/sierra.htm>

figure, but even if they were to give ten times more than what the GoSL gives, it would not be enough to maintain coverage, let alone increase coverage.

The figures for sanitation and hygiene promotion are similarly extremely low, with US\$ 1.4 million allocated to serve the entire population of Sierra Leone – 5.4 million people. Those figures work out at 26 cents per person. Although sanitation and hygiene promotion is often cheaper to provide than water infrastructure, this figure is still woefully inadequate. When viewing the Ministry of Health Budgets, this becomes apparent, as whole sections of desired activities remain unfunded. Vital work, such as, ‘Extend environmental sanitation services country-wide’ has no funds recorded as spent on it in 2003, and none planned for 2004.

## 2.3 Where the financing is spent

The ‘brief explanatory note on the Salwaco budget for FY 2004/05’ provided by the parastatal places a definite emphasis on the expansion and rehabilitation of existing schemes for towns and larger villages. The projects listed under ‘activities undertaken in 2004’ all use larger-scale technologies, such as gravity-flows schemes, dams, piped systems, and treatment works. There is hardly any mention of the rehabilitation of wells, drilling of boreholes or other small-scale intervention more suited in a rural community or smaller village context.

Where ‘villages’ as opposed to towns are mentioned as having been served, it is as ‘villages on the Bo/Kenema Highway’ and ‘villages on the Kalangba/Makeni Highway’, ie: villages that are easy to reach as they are beside main roads. The Salwaco budget seems to indicate a neglect of the more remote rural areas and smaller communities, with the majority of resources being poured into more sophisticated services for easily-accessible, larger communities and towns.

**Table 5**  
Planned expenditure of  
the Sierra Leone Water  
Company 2004/05<sup>15</sup>

	million Leones	(US\$)
Headquarter	615,400,000	(250,672)
Northern province	563,667,367	(229,599)
Southern province	557,100,000	(226,924)
Eastern province	588,433,000	(239,687)
<b>Total</b>	<b>2,324,600,367</b>	<b>(946,884)</b>

With regard to the sanitation and hygiene promotion spending by the Environmental Health Division, the majority seems to be directed at building up the capacity of district-level staff through basic equipment and training, and awareness raising among communities. The activities seem to be good, with a focus on grass-roots changing of behaviour, but the amount the ministry is able to allocate to these essential activities is very low, due to an inadequate budget.

<sup>15</sup> From the *Brief explanatory note on the Salwaco budget for FY 2004/05*, Salwaco.

## 2.4 WaSH – financing in the future

Sierra Leone has started drawing up plans to meet sector needs in the future. As we can see, even though some of the planned targets are not very high and will still leave coverage desperately low, the financial requirements to meet these targets are extremely ambitious in that they will demand a large increase in funding to the sector from all sources.

	Investment (US\$ millions)	Coverage increase (%)
Urban water supply and sanitation services serving 12 District H/Q towns and the capital Freetown	13.0	30–52%
Small towns water and sanitation services serving 149 Chiefdom H/Q towns and 4 Rural District H/Qs	15.0	20–45%
Rural water supply and sanitation services serving 1,000 communities and approximately 1–2 communities per year per chiefdom	8.0	16–32%
Integrated Water Resources Management	10.0	35%
Capacity building	7.5	70%
Programme Management Support	2.5	NA
<b>Total</b>	<b>5.6</b>	

**Table 6**  
Cost of the immediate needs for water and sanitation (2003–2009)<sup>16</sup>

The projected or anticipated sector commitment for achievement of this goal as seen in the draft sector review of the PRSP is: (for 2004–2009)

Sector	US\$ millions
Government of Sierra Leone	7.5
IDB	3.5
World Bank	7.5
Others	5.5
<b>Total</b>	<b>24.0</b>
<b>Total requirements</b>	<b>56.0</b>
<b>Funding gap</b>	<b>32.0</b>

The new commitment on the part of the GoSL is commendable. But the realism of the commitment has to be questioned, as it is about three times more than what they gave in 2004. There is, though, a desire to think big and work hard on the part of all those working in water, sanitation and hygiene in Sierra Leone.

<sup>16</sup> Development Partnership Committee  
– DEPAC, 2003.

# 3 Areas to be addressed if current sector financing is to be made more effective

Having presented the financial facts of Sierra Leone's water, sanitation, and hygiene promotion (SECTIONS 1 and 2), in our analysis there are certain areas that need to be addressed for the sector to be made more effective.

## 3.1 Wide-scale corruption denies money to basic services

A recent national corruption perception survey in Sierra Leone found that a 95 per cent of respondents considered corruption rampant in most government departments.<sup>17</sup> This corruption is so widespread that Sierra Leoneans believe that it is the number two security threat, capable of plunging their country back into war.<sup>18</sup> The previous conflict was fuelled by embitterment at inequitable wealth and poor basic services. Sierra Leoneans saw that their poverty was in a large part due to some misappropriating money that could have been used to deliver health, education, and water services to many.

Mismanagement prevents funds being available for the state to use to provide basic services. Sierra Leone is a country rich in natural resources but the state is unable to capture this income. For example, the government of Sierra Leone collects only an estimated 15 to 30 per cent of duties on exported diamonds. Even this paltry figure is a great improvement on the five per cent of duties collected until 2003.<sup>19</sup>

Unfortunately, should funds reach the state, the likelihood of them being used to deliver basic services is still slim, with a substantial amount being siphoned off by corrupt politicians. The World Bank estimates that in 2003, only five per cent of pharmaceuticals within the health state system reached their intended destination. There is no reason to believe that the Health sector is more corrupt than other sectors, water and sanitation funds are inevitably also being corrupted.

'The overarching difficulty appears to be that the government lacks the will to address the problem, and the donor community lacks the will to apply serious pressure' (Crisis Group Africa Report).<sup>20</sup> The same report goes on to quote diplomats that donors have a mentality of 'pushing funding out the door' rather than insisting it is spent in a transparent manner. Public expenditure needs to be tracked, those found mismanaging funds need to be dealt with firmly and publicly, and donors need to ensure that their funds are used for the purpose intended.

This situation needs to be urgently addressed, if it is not then Sierra Leoneans will continue to live in grinding poverty, without access to water, sanitation or other basic services. If this injustice is allowed to continue, it may well push the country back into conflict.

<sup>17</sup> Anti-corruption Commission. *Survey report national perception and attitudes towards corruption in Sierra Leone*. August 2000.

<sup>18</sup> This study was done for the Security Sector Review of the PRSP.

<sup>19</sup> Crisis Group Africa Report. *Liberia and Sierra Leone: Rebuilding failed states*. December 2004.

<sup>20</sup> No 67 *Sierra Leone: The state of security and governance*. September 2003.

### 3.2 **The work of the Health and Sanitation Ministry is made less effective through externally imposed financial bureaucracy**

The Ministry of Health and Sanitation is reliant on small tranches of money from the Ministry of Finance, which, although promised in the budget, must be newly applied for each quarter. Officials within the Ministry of Health and Sanitation complain that the procedures for accessing the funds are immensely complicated. They also expressed frustration at being accused by the Ministry of Finance of not spending its funds.

**'There isn't a problem with absorbing funds, it's that accessing funds is a nightmare ... The Ministry of Finance tells you that the Ministry of Health is not spending its funds ... but we bombard them with requests.'**

Senior official,  
Ministry of Health and Sanitation

In the third quarter of 2004 there were some sections of the Ministry of Health that had not yet received their first quarter funds. The ministry is unable to pay for vital services on time, contractors walk the corridors unpaid for months. This situation has also resulted in anger among health professionals at a local level, who submit their paperwork to the line ministry centrally for promised resources, but don't receive what they need due to these bottlenecks.

Not knowing whether they will receive the full amount budgeted for them, and not knowing when they might receive it, makes the Ministry of Health and Sanitation substantially less effective than it should be. The only self-accounting ministries in Sierra Leone are those with political muscle: the police and the military.

### 3.3 **Insufficient regulation of the water parastatals**

Salwaco was set up in 2001 as a parastatal company to deliver water and sanitation services to Sierra Leone outside of Freetown. Previously, the Water Services Division at the Ministry of Energy and Power did this job, but after Salwaco was created, the WSD was left to provide regulation and policy guidelines. A WSD chief moved to become Managing Director of Salwaco. This seems to have caused a number of problems.

WSD has been left understaffed, and the personnel are seemingly reluctant, or under a certain cultural pressure not to be seen to impose on Salwaco because it is now managed by their old colleague. The Managing Director of Salwaco is left in a position of tremendous power, and has been the force behind the new national policy. Letters purporting to come from WSD on occasion have a Salwaco letter-head! The national policy is a very welcome development, but it seems inappropriate for the parastatal to be initiating the policy that will develop its own regulation. There are concerns among NGOs that the Salwaco board meet extremely rarely and that accountability is an issue. Salwaco maintains that its management committee meets monthly, and that it is



transparent and accountable. It is hard to ascertain the complete situation, but suffice to say that the lack of trust between NGOs and Salwaco, whether justified or not, is very problematic. The intervention of a strong regulator, accepted by all parties as effective, would be the only answer to this dilemma.

With this in mind, Unicef has suggested a restructuring and recruitment drive for WSD. This has met with a certain amount of resistance from WSD. Until this situation is resolved, a truly effective use of funds in the sector is unlikely to happen, and unwise decisions will continue to be made (see SECTION 3.4). As George Saquee, head of water at Unicef Sierra Leone, points out, ‘You can’t be the dancer and drummer at the same time.’

### 3.4 **Lack of participation in Salwaco policy making, resulting in stakeholder disagreement**

The current coordination group, including NGOs and Salwaco, formed as a result of an edict in January 2003 that all water-points should be tested. The costs for the test were to be paid by the NGOs or CBOs installing the water-points, and they were led to believe that these costs would be substantial. The NGOs and CBOs protested and demanded a meeting, having not been consulted, and, to this day, the issue remains partially unresolved. Meetings have continued but we are informed that they are fairly chaotic and have not solved the problem of a lack of meaningful participation in decision-making. It is clear that Salwaco is very suspicious of NGOs, particularly INGOs. This is compounded by the fairly low capacity of most indigenous NGOs to take part in advocacy, as they are understaffed, overworked, and often inexperienced in this area.

Currently, NGOs are unhappy with a decision made by Salwaco on technology types. INGOs, with Oxfam and Unicef leading the way, have been trying to standardise technologies and develop a spare parts system. But this stopped abruptly when Salwaco began to insist that a different pump type be used – the German Kardias pump. This is an extremely expensive pump that is difficult for communities to maintain. Tearfund was equally opposed to this decision. After local lobbying, Tearfund staff working in Daru were told by District Health officials that other shallow well pumps were allowed, but, in the end, the district was overruled by Salwaco. Unicef estimates that an order of 80 of the currently-used India Mark II pumps would cost approximately \$3,000, whereas they would struggle to get more than one Kardias pump for the same money.<sup>21</sup> Unicef aims to spend \$3,000 maximum on a well, but Salwaco believe that \$7/8000 is the correct figure.

The head of water at Unicef, George Saquee reflected, ‘We will have to serve significantly fewer people, and donors may frown upon us if we have high costs ... If the government insists that we should use very expensive pumps then they should subsidise agencies to do that... I know that an India Mark II I installed in 1981 is still working; we shouldn’t underestimate them.’ Salwaco’s response is to point out that the Kardias pumps are longer-lasting, and retort that ‘we cannot afford to sacrifice sustainability on the altar of cheapness. Why do NGOs pay themselves so highly only to supervise very cheap works?’

<sup>21</sup> At the time of writing, Kardias were about \$2,300 on the local market, and \$1,800 when bought in bulk.

If Salwaco continues to make policy without the participation of communities, NGOs, and on occasion local government, then the quality of those decisions will need to be questioned. As we can see, contentious financial decisions seem to be being made. For an effective financing of the sector, all stakeholders need to be able to play their part and contribute their expertise.

### 3.5 **Poor cost recovery due to lack of willingness to pay, and wastage**

When Sierra Leone came to independence in 1961, the Government initiated a free water policy. Once officially recognised, free water became a mindset that is now very hard to break.

Guma Valley Water Company is having substantial problems with cost recovery, to the detriment of operation and maintenance, and expansion of services. Unlike Salwaco, Guma Valley Water Company gets no government revenue and is supposed to operate through cost recovery and by leveraging funds through loans. A World Bank Project Assessment Report<sup>22</sup> that came out in September 2004 says that, in Freetown, only 30 per cent of the water supplied to the city is accounted for. There is no universal billing system in place and close to 80 per cent of customers are billed, not on consumption, but on the rateable value of their property. The amount owed by customers is 25.5 billion Leones (\$9.1 million), which amounts to 2.5 times the end of 2003 revenues of GVWC. Even government buildings are not paying their water bills – a problem that is being tackled in a new tough approach from the GVWC. In 2004 a number of ministries and other government buildings had their supply cut off – including the prison.

There is little excuse for most urban customers not to pay their bills, as the water tariffs are ‘probably one of the lowest in SSA’ (World Bank).<sup>23</sup> Tariffs have not changed since 1999, and if we have a household of ten people each using ten gallons per day, the metre will charge substantially less than £1 for that water each month.<sup>24</sup> This low cost may well contribute to the significant amount of wastage currently occurring, which Joel Hammelberg, the Acting Managing Director of Guma Valley Water Company puts at 40 per cent. He comments that wasting water that has been treated to become clean, healthy and pure for drinking is ‘criminal’.<sup>25</sup>

The lack of revenue from bills payment is hitting Guma Valley hard. The company is not able to expand its services to poorer areas (particularly in the east of the city), or keep up maintenance of existing infrastructure. ‘It is common to see people fighting and cursing as they scramble for water from pipes or the few street taps in Freetown. Three-quarters of homes in the east and in the outskirts of Freetown do not have water supply.’<sup>26</sup>

With regards to Salwaco, the proportion of operating costs coming back in cost recovery is estimated verbally to be at about 25–30 per cent. This figure seems at variance with the African Development Bank’s estimates that, roughly, only 10 per cent of people receiving water are paying for it. Salwaco’s tariffs are, like those of Guma, extremely low at US\$ 0.56 (1,500 Leones) per month per connection.<sup>27</sup>

<sup>22</sup> Report No. 28549-SL, Project Assessment Document, 21 May 2004, World Bank.

<sup>23</sup> Ibid.

<sup>24</sup> Calculated from the Guma Valley Water Company Statement of accounts 2003.

<sup>25</sup> Panapress, September 2004.

<sup>26</sup> *Africa News*, 29 September 2004.

## Lessons for donors

The World Bank gave Sierra Leone a large loan in the early 1990s – the Freetown Infrastructure Rehabilitation Project (Credit 2511 – SL). The water supply component was \$6.86 million.

GVWC had significant problems with cost recovery, and so a condition of the loan was that it was repaid through revenue gained from water fees. GVWC were compelled to rapidly install water meters. This was a controversial move, and sparked sometimes violent public unrest, exacerbated by the general political situation. Just before the military coup of 1997, the Government intervened to stop the installations. During 1997–99 when the conflict raged, more than 1,000 domestic water meters were illegally removed, and other parts of the infrastructure were destroyed.

Since the return of stability to Sierra Leone, the Government has been supportive of cost recovery measures, but remaining infrastructure that survived the war is not being maintained and the ‘sustainability of project benefits is unlikely’ (World Bank Project Assessment). Despite the promised benefits of the loan not materialising, the Government is left with the liability to repay the credit to the bank, as well as compensating foreign contractors for any losses.

**LESSON 1** ‘Implementing reforms such as universal water metering and increasing the levies are highly controversial issues and can even threaten post-conflict stability ... a more flexible approach – perhaps adopting a more realistic time frame or a more incremental attitude towards reforms – may provide more sustainable results.’ (World Bank Project Assessment)

**LESSON 2** The project was appraised in 1992/93, when conflict had started in the east of Sierra Leone. Still, the World Bank went ahead with a large infrastructure loan. Donors have a responsibility to carry out proper risk analysis and not place a very poor country in unnecessary debt unless there is a reasonably certainty that they will see the benefit of the project.

### 3.6 **Poor line ministry coordination**

Coordination between the line ministries housing sanitation and water is fairly poor. During a recent cholera outbreak, a taskforce was set up by Ministry of Health. Salwaco was responsible for the chlorination of water, but failed to attend most meetings. INGOs had to take the initiative to encourage Salwaco to meet with the ministry as the chlorination wasn't happening on the ground.

The Head of Planning at the Ministry of Health had not heard of the current WatSan coordination meeting hosted at Salwaco, and thought it unlikely that his staff were going without his knowledge. These kinds of problems are hampering the work of both ministries, with the bottom line being that finance must be being wasted.

In other arenas, coordination is much better. At district level, health and water generally seem to work well together (see [SECTION 4.2](#)). Ministry of Health coordination with outside donors seems good: they have a special donor coordination office. Equally, there is a multi-sector forum, called the Development Partnership Committee (DEPAC), which tracks overall progress and facilitates coordination among donors in support of national efforts. This meets bi-monthly under the chairmanship of the Vice-President of Sierra Leone. The World Bank and Unicef are Co-Chairs.

## 4 Ways in which current sector financing is being made more effective

While recognising that there are a number of ways in which the financing of Sierra Leone water, sanitation, and hygiene promotion could be made more effective, the feeling in the sector is optimistic. There are a number of developments that should be highlighted as positive indications of the hard work and commitment of the Government of Sierra Leone, donors, NGOs and communities towards meeting the MDG water-related targets. In our analysis, the following is making a difference.

### 4.1 Improving the accountability of service providers

In 1996, the GoSL set up a Strategic Planning and Action Process (SPP) to facilitate wide-scale national consultation and focus group discussions on all aspects of development including WatSan and health. The resulting national development strategy was disrupted by hostilities, but the same techniques were used again to formulate the I-PRSP in 2001. Thousands of citizens gave their views through a network of over 100 trained SPP volunteer facilitators. In order to be as inclusive and transparent as possible, a combination of methods was used. These included a Budget Game in which development priorities were identified and ranked by citizens, and a Smiley Game, which was community-based performance monitoring of local service providers such as hospitals or schools.

In 2004, both men and women rated ill health/sickness as the number one cause of poverty. A national WatSan strategy was initiated by the GoSL in late 2004. At the first consultation for the national strategy in October 2004, the Head of Planning at the Ministry of Health named the poor WaSH situation as the primary cause of sickness and death in Sierra Leone.

The techniques used by the Strategic Planning and Action Process are widely seen as successful in creating a more responsive culture among service providers, and SPP methodologies have been exported to, and applied in, several other countries including Gambia, Côte d'Ivoire and Guinea.

Edmund Koroma, Director,  
Economic Policy and Research  
Unit, Ministry of Finance

**'If the poor believe that their voices would be reflected in the decision-making process, then they will see the focus group discussions as the platform to air their views / grievances ... this may enhance transparency and accountability in public sector management and increase ownership of the development process by local people.'**

## 4.2 Public Expenditure Tracking Surveys

The Government conducted a pilot Public Expenditure Tracking Survey (PETS) in 2000. The survey intended to measure public expenditures by budgetary allocations to determine the actual public spending that is used for its intended purpose, especially in rural areas. The results revealed significant gaps in the disbursement of resources by some key ministries. They also showed variance between budgetary allocations and actual expenditures due in part to stringent tendering procedures for procurement and emphasis on transparency. The survey also confirmed that slow disbursement or non-disbursement of donor funds for many development projects in the rural areas greatly affected implementation of projects. In response:

- GoSL introduced a new budget and accounting code that showed allocation of resources by activity and region. Resources can now be better tracked.
- Through the Medium Term Expenditure Framework process, mechanisms such as the MTEF Technical Committee are now in place to sensitise beneficiaries and civil society in budgetary oversight (this was particularly in response to finding that public services are too concentrated in Freetown, and that, outside of Freetown, people are not aware of what public services to expect).
- The budget process was re-designed in 2001 to ensure greater beneficiary involvement in the delivery of services and more emphasis on results and outcomes (see SECTION 4.1).

In Sierra Leone the education PETS confirmed that leakages in the school subsidy were reduced substantially to 18.5 per cent in the first term of the 2002/01 school year from 54.9 per cent in the third term of the 2001/02 school year. This was achieved by eliminating intermediate steps between the cheques issued by the Office of the Accountant-General and the head teacher of each school district.<sup>1</sup> (Sierra Leone, HIPC Expenditure Tracking: Assessment and Action Plan, World Bank, Addison and Villela, 2004)

### The power of PETS

<sup>1</sup> Public Expenditure Tracking Survey (PETS) for Financial Year 2002, Selected Expenditures (May 2004).

With the assistance of a follow-up DfID/World Bank PETS support mission, a new PETS was launched in September, 2003. This covered all areas of the country; traced key lines of expenditure in the education, health, and agriculture sectors; and piloted a streamlined surveying instrument for assessing expenditure leakages in the education sector. The new instrument was based on a conceptual model for measuring expenditure leakages, including those associated with in-kind resource flows.

‘There has been a significant improvement in terms of the introduction of the PETS forms. When I was a District Health Officer in charge of a hospital I would just get drugs, or an x-ray machine arriving unexpectedly, that I hadn’t requested. Someone called a vote controller decided allocations with no consultation’ (Dr Kamara, Head of Planning, Ministry of Health and Sanitation). He notes, though, that the process is a little

cumbersome, with people having to travel from all over the country to fill in their PETS forms. ‘They might travel for one or two days to get here, only to be called back to clarify something, or change a mistake. But it is much better than the secrecy of the past,’ says Dr Kamara. Unfortunately, although sanitation and hygiene promotion now have fairly transparent financial flows, water (which is dealt with through Ministry of Energy and Power) has not yet been subjected to a PETS. It is extremely hard to track the spending on water and the sector is in much need of a survey, but we don’t know of any planned.

### 4.3 **Recognising the importance of software and integrating it at local level**

Justin Musa, Managing Director  
of Sierra Leone Water Company

**‘The district health team is the first place we go to when we enter a district.’**

Health has been decentralised to the district level for some time, and has been successful at operating there. Water is going to be decentralised in the near future, with Salwaco engineers becoming part of district councils. At the moment, water and sanitation are being integrated at a local level, through the active efforts of both Salwaco water engineers and district health teams. Two different districts – Kambia in the north-west, and Kailahun in the east – reported satisfaction with the coordination at local level, and both were positive. This coordination process will become all the easier as power moves to district councils to provide both services. Since the war, all schools and health centres being re-built or newly built must provide sanitation facilities and hygiene promotion. There currently exists in the public sector a desire to deliver integrated WatSan services. This will bring great advantages in sustainable services and a healthier population, and is, therefore, an extremely effective financial decision.

Donors and indigenous NGOs are also prioritising integrated sanitation and hygiene in water projects. There are real attempts to tackle situation-specific problems and to listen to the priorities and concerns of communities. Agencies visited for this research have not just been building pit latrines, but trying to get to the root cause of why people may not be using appropriate sanitation. Many agencies use subsidies for hardware in Sierra Leone. This is a controversial issue, as there is increasingly a view that subsidies can suppress demand for sanitation. But, in fact, as the situation appears very positive: agencies that are using subsidies had thought long and hard, listened to the fears of communities and conducted research before coming to the conclusion that it was the best decision under difficult circumstances. This rejection of the recipe-book approach and responsiveness to the situation should lead to properly-targeted financing where it is most useful.



Subsidies are being used to combat the problem of unsafe latrines. Unicef (working nationally) and the Evangelical Fellowship of Sierra Leone (working in the north-west) both highlighted unsafe latrines as a serious issue.

EFSL is subsidising the provision of bricks and cement for lining latrine pits in areas with clay soil. Without this intervention, the latrines have routinely collapsed. The newly-resettled community where EFSL is currently working cannot afford to buy these materials, but they dig the pit and build the super-structure, and then feed the workers who come to do the rest.

Unicef used to promote traditional latrines, but had experienced big problems. 'If people fell into it, they were turned off using a latrine for life; it was bad publicity. We treat the concerns of the community very seriously, and we must respect their opinion and suspicions. It's a waste of money if we don't,' says George Saquee of Unicef.

### Targeted subsidies for sanitation

## 4.4 Tackling the problem of operation and maintenance

In the 1970s, the Government of Sierra Leone accepted a loan from the French Government to build 42 water supply stations; less than four are still working. Inadequate finances for operation and maintenance are surely the biggest wastage of money in the WaSH sector. Large- and small-scale infrastructure lying disused is a common story and yet one that has been inadequately tackled in many countries. But the water sector in Sierra Leone is taking this seriously.

Salwaco has drafted a hand-pump maintenance paper which says that communities have to provide money that can be used to buy spares up front. This money is to be kept in the village where there are trained pump attendants who, in the event of a breakdown, should be able to fix the pump. The district council is there to step in should the maintenance problem be serious. The amount of money to be provided up front is still to be finalised in the national policy. An initial decision that \$110 would be demanded from the communities seems very expensive, (possibly related to the nature of the pumps, see SECTION 3.3). There are many communities in Sierra Leone who during certain seasons survive on one meal a day, asking these communities for such a substantial amount does not seem realistic. It is a positive step forward that this thorny issue is being tackled, but more thinking needs to be done to ensure that plans are achievable and protect the poor.

In 2005, Unicef will also be trying to get money up front for maintenance. It has been buying two years worth of spare parts with every purchase of a pump, and putting them in local shops to support some local parts suppliers. It is also training two pump attendants for each chiefdom (below district level) and these men or women will step in if the problem is too much for the pump attendants at community level. Unicef is working with district councils in all of this, and procuring bikes for district council staff to use to visit and monitor the projects.

28 African Development Fund, TOR water supply and sanitation study, April 2004.

## 4.5 Learning lessons from the past

In the 1980s, Sierra Leone joined the International Drinking Water Supply and Sanitation Decade (IDWSSD). A National Action Plan involving all concerned ministries and executing agencies was prepared under the chairmanship of the Chief Engineer of the Water Supply Division. Over 3,800 water well and VIP latrine technicians were employed and trained during the IDWSSD.<sup>28</sup> Substantial investments were made in the water sector by the Government, and communities were also expected to contribute. Before the pump was installed, the community had to provide 4,000 Leones, which was a considerable amount of money then.

All this background in best practice and past success will hold Sierra Leone in good stead as they try to rebuild to meet the MDG targets. It was noticeable how many people, at district level and at national level, in public sector and in NGOs, mentioned lessons learnt from the IDWSSD.

Justin Musa, Managing Director  
of Sierra Leone Water Company

**‘We learnt the importance of spares during the international decade on water ... we learnt a lot of ideas from other countries and tried to adapt them to the national situation.’**

Learning lessons and applying them should result in Sierra Leone being able to use money more effectively in this next International Decade on Drinking Water than in the last, and the results should be all the better for that.

# Conclusions and recommendations

Sierra Leone has come a long way since the end of the conflict in 2000. Yet is still bottom of the human development index, with perhaps the worst access to safe water and adequate sanitation in the world. This is the time to redouble efforts. This is the moment that external players such as NGOs and donors can add the most value by supporting the Government and civil society in Sierra Leone to rebuild and start to deliver the basic services the people have been denied for so long.

But this report's findings show that the way this support should be delivered needs to be carefully thought through. Certainly a substantial amount of money is needed. The government of Sierra Leone have not sufficiently prioritised the sector, with more going to the road fund in the 2003 budget than was allocated to water services, sanitation and hygiene in total. External funds account for far more than half of all money going towards water, sanitation and hygiene promotion, and even more than this is needed. Bilateral donors in particular are neglecting the whole sector, and multi-lateral donors are neglecting the rural areas of the country.

More importantly though, the funds need to be used in the right way, and currently we can have no confidence that this is happening. Corruption and mismanagement of public funds is rife across the board in Sierra Leone. In our short time there, we did not uncover any hard evidence that this was the case, particularly in water, sanitation, and hygiene, but there are a number of worrying indicators it might exist. In particular the almost complete lack of regulation of the water sector was a concern, as was the poor civil society/NGO access to policy making. The Ministry of Health and Sanitation doesn't seem to suffer these problems, but has their own in the form of bureaucratic bottlenecks preventing them accessing funds.

Saying all this, there are a number of things to be encouraged by in the WaSH sector in Sierra Leone. A national WatSan policy is being formulated, and lessons that the country learnt during the 1980s International Decade of Drinking Water are accepted as best practice. At a central and a local level we found sanitation and hygiene being integrated into water schemes, and an emphasis of availability of spare parts. These basics of good practice should auger well for maintaining and building on the coverage that has been already been achieved. Equally, the government is attempting to tackle corruption, and we highlight the Public Expenditure Tracking Surveys and moves to improve the accountability of services providers as vital moves in the right direction.

Decisions made now will determine whether or not Sierra Leone will meet the Millennium Development targets on water and sanitation, and every stakeholder needs to play their part.

## Donors

- As Sierra Leone transitions from a post-conflict recovery phase into a development phase, Donors must prioritise long-term commitments to development in Sierra Leone to capitalise on progress made so far and to prevent slippage back to conditions that allowed conflict to flourish.
- Donors could consider putting in place conditions that aid money is spent transparently
- A couple of bi-lateral donors could start taking responsibility for water and sanitation funding.
- Those donors concentrating on funding governance issues could address governance problems sectorally, particularly around service delivery. The water sector needs particular governance attention and shouldn't be neglected as donors concentrate on overarching governance issues..
- Donors could put money towards the capacity building of the Water Services Division, and both parastatals, as the Government of Sierra Leone is more likely to allocate public funding to a well-organised and well-performing water sector.
- Multi-laterals could give more money to rural areas, and importantly, in grant form.
- The World Bank could go to the greatest lengths to ensure that its recent loan to GVWC has sustainable benefits, with realistic plans inbuilt for financing operation and maintenance.
- Donors could write off loans made just before or during the conflict. (The Commonwealth Development Corporation has waived an outstanding loan of £2,777,278 to GVWC recently).
- Donors could focus on the rehabilitation and rebuilding of existing infrastructure.
- Donors could allocate money for training of staff to replace those who went abroad during the war, and develop incentives to persuade expatriate Sierra Leoneans to return.

## The Government of Sierra Leone (and GVWC and Salwaco where relevant) could consider:

- increasing the collection of customs duties on diamonds exported from its territory, and putting in place transparent accounts of how this money is spent.
- having a 'zero tolerance' approach to corruption in government ministries, putting in place procedures to track funds (such as Public Expenditure Tracking Surveys), publish results, and publicly investigate where money is going astray.
- particularly commissioning a Public Expenditure Tracking Survey on the water sector and use it to make a comprehensive audit of financial governance.
- pushing for the rapid development of the new National WatSan Policy. The process has currently stalled.

- ensuring that the new national policy includes a strong effective regulatory body, as this vital role is currently not being performed.
- moving ahead with the long-talked-about decentralisation of rural water to the district level.
- investigating the wisdom of forcing NGOs and donors to use Kardia pumps, and investigate the transparency of decision making in Salwaco.
- finding a way to address the lack of coverage to the slum areas in Freetown.
- ensuring that targets and accompanying financing commitments in the upcoming PRSP are ambitious but in some way achievable.
- assessing the situation of most ministries not being self-accounting, and work out a system with the Ministry of Finance that allows a more reliable and punctual stream of promised funds.
- encouraging a regular national-level coordination meeting which includes all stakeholders from water and sanitation. This could be hosted by DEPAC, so as to ensure the equal commitment of both line ministries.
- raising the very low urban tariffs for those who can afford to pay, while creating an effective system to protect those who are too poor to pay. In rural areas Salwaco needs to discuss with Districts what a realistic level of cost recovery might look like in each area.

### **INGOs could:**

- help build the capacity of indigenous NGOs in advocacy and policy work.

### **NGOs could:**

- constructively advocate around governance issues, pushing for greater accountability, transparency and equity in the delivery of services.
- engage with the national policy process on WatSan and the PRSP process.
- explore rainwater harvesting: most water for domestic use is obtained from groundwater as surface water is often polluted, but rainwater harvesting seems rarely used. Rainwater harvesting could work well as northern Sierra Leone has annual precipitation of 2,500mm and the south 4,000mm.
- coordinate closely with others working in the same district and with the local government, reporting accurately on activities and finances to the district.
- co-operate with government plans to ask communities to provide money for spares, and encourage a local market for spares.













**Water Supply and Sanitation  
Collaborative Council**

[www.wsscc.org](http://www.wsscc.org)

International Environment House, 9 Chemin des Anémones,  
1219 Châtelaine, Geneva, Switzerland



[www.tearfund.org](http://www.tearfund.org)

100 Church Road, Teddington, Middlesex, TW11 8QE, UK  
Registered Charity No 265464