

Ghana



WaterAid/Jon Spaul

Ghana, a tropical country situated on the west coast of Africa, is one of the most densely populated in the region. When it regained its independence in 1957 it was one of the richest nations in Africa – it produced a tenth of the world’s gold and was a leading cocoa exporter. However, following an optimistic start Ghana suffered a series of setbacks including coups, food shortages and corruption that led to years of economic decline.

Since 1993, when a new constitution was adopted and political parties were able to form, the country has become more stable. Freedom of speech and a vibrant press are now helping to deepen the country’s democracy. It is now seen as a model for political and economic reform in Africa.

Yet, despite this, it is very poor and heavily indebted. The three northern regions are particularly deprived with one in ten children dying before their fifth birthday.

WaterAid in Ghana

Plans: 2006-2011

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A new strategy running from 2006 – 2011 sets out the plans and activities for this period.

The key aims are to:

- Help 80,000 people gain access to water, sanitation and hygiene every year by 2011
- Support local partner organisations to raise their own funds, while keeping a strong advisory role on how these funds are spent to ensure a further 40,000 people gain access to water, sanitation and hygiene every year by 2011

One of WaterAid's biggest aims is to ensure that the problems of the poorest, socially excluded and marginalised groups, like women, elderly, disabled and those living with HIV/AIDS, receive increased support. To do this it aims to influence policies that act as obstacles to these groups accessing water, sanitation and hygiene. It will help local communities to engage with national and local governments so that their views are taken into account by decision-makers and service providers.

As more poor people move into towns and

WaterAid has worked in Ghana since 1985 and during this time has developed strong links with both policy makers and its eight local partner non governmental organisations (NGOs). These partners carry out the day to day management of water, sanitation and hygiene education projects in six out of ten of the country's regions. This work is vital as inadequate water supply and sanitation services contribute to over 70% of diseases in Ghana, costing the country significantly in terms of healthcare and productivity.

WaterAid and its partners work with some of Ghana's poorest people to help improve their access to water sanitation and to promote good hygiene. Currently only 44% of the rural population and 61% of the urban population have access to safe water while fewer still have sanitation – 11% of the rural population and 40% of the urban population.

All of WaterAid's projects in Ghana use technologies that are appropriate to local conditions, affordable for even the poorest in society and easy to maintain. To ensure there are long term benefits communities are encouraged to take responsibility for their projects. They are involved in all stages of the work, from the planning through to the building, maintenance and management.

For water supplies, the programme focuses on hand-dug wells where water is either lifted using a rope pump or a Nira handpump. Improved sanitation is promoted

through the use of ventilated improved pit latrines, while village health coordinators help others in their communities to learn about good hygiene.

In the city of Tamale WaterAid's partners also look at ways of preventing the spread of trachoma, a preventable blindness mainly caused by contaminated water and poor hygiene, and guinea worm – a painful disease that affects people through contaminated water. Along with safe water and sanitation facilities nylon water filters are distributed to help stop the spread of guinea worm.

WaterAid helps its partners to develop and grow into independent organisations which then contribute to the wider water and sanitation debates. WaterAid offers its partners financial support, training and technical advice as well as assistance with planning, budgeting and institutional development.

Atoapoka Azuma from Asamponbisi Village.



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"There is enough water now for everything I need to do: cooking, washing, bathing myself and the children. This water is clean and much better than the old source, which made us sick with diarrhoea and skin diseases.

At the old source, the water was in the ground. It took a whole day to collect enough water for two days. With the time I save now that we have the pump close by, I weave baskets to sell. With the extra income I get from selling baskets, I can buy food, and school uniforms. Before, I had no time to weave baskets, which was a problem. Now there is a real change. I cannot read or write and my hope for the future is for my children to have more chances than me, to get an education and lead good lives."

cities looking for work the numbers living in squatter settlements with inadequate facilities are increasing. WaterAid will therefore also increase its work with poor urban communities.

Reducing poverty

Water and sanitation are included in both the international Millennium Development Goals (MDGs) to reduce poverty and the Ghanaian Government's Poverty Reduction Strategy Paper. The Millennium Development Goals include targets agreed by all governments to halve the proportions of people without access to water and sanitation between 1990 and 2015. However there are many challenges to ensure that these plans become reality. The first is money. To reach this target \$160 million needs to be spent annually in Ghana compared to the current annual investment of \$52 million, of which only 3.5% comes from the Ghanaian Government.

Other obstacles include the country's over-elaborate institutional arrangements for providing water and sanitation which need greater coordination; inadequate attention to sanitation; limited technology choices; little involvement of communities and the poorest people; and the slow rate at which responsibility for water and sanitation is moving from national to local governments.

WaterAid will increase its advocacy work to lobby for greater investment in these essential services and to ensure the money that is available is spent in the most appropriate ways. It will focus on issues of equity, sustainability of facilities and accountability.

WaterAid also works to influence other organisations in Ghana including government and donor agencies at both district and national levels. It is strengthening links and forming networks with these organisations so that WaterAid's work has a wider impact. Since 2005 it has actively campaigned in Ghana, notably through the Global Call to Action Against Poverty, which was known in the UK as Make Poverty History. The Global Call is a world-wide alliance calling for world leaders to live up to their promises and make a breakthrough on poverty.

WaterAid will also support local governments with their new responsibilities for water and sanitation services so that they can plan, coordinate and implement projects effectively. Together, with WaterAid's partners, they will work towards reaching the MDGs in each area. WaterAid will specifically help to map the location and condition of water facilities in the areas, to ensure all future work reaches people in an equitable way.

Finally, future projects in Ghana will look at the issue of water resource management to ensure that water is used and managed sustainably.

Ayampoka collects water from a scoophole in the river bed in the Bongo district. Each year the river dries up, leaving the villagers to dig down to reach muddy pools of water.



WaterAid/Jon Spaul

"I come here four or five times a day to collect water. I start early in the morning and work until midday to fetch all the water I need. I have a nine month old baby, who gets looked after by my mother when I am here. It is difficult to find time to look after the baby and collect water.

I give my baby this water to drink. She started to drink water as well as milk when she was six months old. She is healthy at the moment. I wish we could have a pump here to ease my burden."



Ghana

Area: 238,537 km²

Capital: Accra

Other main cities: Kumasi, Tamale, Sekondi-Takoradi, Bolgatanga

Population	21.2 m
Infant mortality	95/1000
Life expectancy	56 yrs
Water supply coverage	79%
Sanitation coverage	58%
Below poverty line	39.5%
Human development index	138
Adult literacy	54%

Sources: World Development Report 2005 and the Human Development Report 2005.

NB: Official statistics tend to understate the extent of water and sanitation problems, sometimes by a large factor. There are not sufficient resources available for accurate monitoring of either population or coverage. Varying definitions of water and sanitation coverage are used and national figures mask large regional differences in coverage.

Achievements to date

- WaterAid's work in Ghana helps over 50,000 people per year
- WaterAid has helped its partners become independent organisations. Together they are now able to carry out more project work in Ghana
- WaterAid is developing its fundraising activities internally from Ghana. Successes so far include substantial funds from the Standard Chartered Bank Ltd

£5 pays for one bag of cement for a latrine slab

£25 pays for the tools for a hand-dug well

£100 pays for the training of ten community water and sanitation committee members

£100 pays for a rope pump and its installation cost

£450 pays for a Nira handpump

£1500 pays for a 40ft hand-dug well fitted with a handpump that provides water for 250-300 people



WaterAid – water for life

The UK's only major charity dedicated exclusively to the provision of safe domestic water, sanitation and hygiene education to the world's poorest people.

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WaterAid/Jon Spaul

24 year old **Sulemana Issa** helps WaterAid's partner NewEnergy to build a ventilated improved pit latrine in Yapalsi, Tamale.

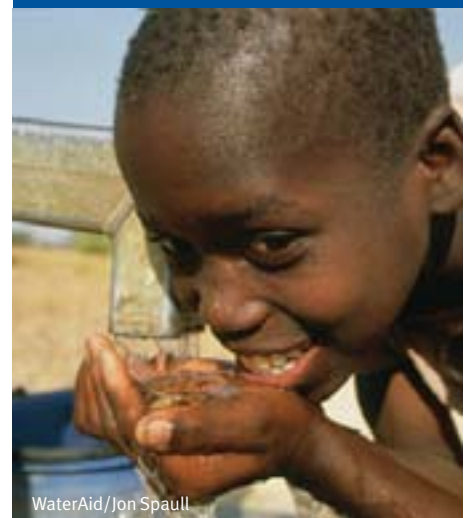


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"I am helping with the latrine construction. I helped to dig the pit, mould the blocks and carry them here. We spent five days excavating the pit, it took one day to mould the blocks and another day to line the pit. I am spending a lot of time here but I will benefit from it so I don't mind.

We used to go to the toilet far away in the bush. It was a real problem and in the rainy season it was very muddy and there were snakes. Having a latrine in the house will improve sanitation around our home and make a real difference. When I have finished the latrine I will be happy to help other households to build theirs."

Nine year old **Nsomah Umala** is from Asamponbisi village where WaterAid's partner Rural Aid has helped the community to build a new water supply.



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"Before we had the pump we went to the stream to fetch water. There were animals drinking there too. The water would hurt my stomach. Now I'm pleased I don't have to go there any more, I never visit there. I am happy with the new water.

Before I had diarrhoea and I had to go to hospital and stay there for five days. It was all new to me. It was big and strange and there were lots of people. I had to get injections and it was scary. I missed school while I was in hospital. I enjoy school so much. When I am older I want to be a doctor because I want to help other people who are sick."