



Commune de Banfora

The national reference for
sustainable water and
sanitation services



Municipal Strategic Plan for
Public Water and Sanitation
Services

2018-2030

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ACRONYMS AND ABBREVIATIONS

ACRONYMS	DEFINITIONS
ADAE	Association for the Development of Drinking Water Supplies (Association de Développement des Adductions d'Eau)
AEPA	Drinking Water Supply and Sanitation (WASH) (Approvisionnement en Eau Potable et Assainissement)
AEPS	Simplified Drinking Water Supply (Approvisionnement en Eau Potable Simplifié)
AEUE	Wastewater and Excreta Treatment (Assainissement des Eaux Usées et Excrétas)
AfricaSan	African Sanitation Forum (Forum Africain de l'Assainissement)
AME	Association of Educating Mothers (Associations des Mères Éducatrices)
AMOC	Assistance to the Municipal Project Management (Assistance à la Maîtrise d'Ouvrage Communale)
APE	Parent Association (Association des Parents d'Elèves)
BF	Standpipe (Borne Fontaine)
BP	Household connection (Branchement Particulier)
CCCc	Municipal Consultation Framework (Cadre de Concertation Communale)
CCEA	Communal Water and Sanitation Committee (Comité Communal de l'Eau et de l'Assainissement)
CESAO	Centre for Economic and Social Studies of West Africa (Centre d'Etudes Economiques et Sociales d'Afrique de l'Ouest)
CGCT	General Code of Local and Regional Authorities (Code Général des Collectivités Territoriales)
CLTS	Community-Led Total Sanitation (Assainissement Total Porté par les Communautés)
COGES	Management Committees (Comités de Gestion)
CRP/PNAEPA	Regional Steering Committee of the National Programme for Drinking Water Supply and Sanitation (Comité Régional de Pilotage du Programme National d'Approvisionnement)
CSD	Sectoral Framework for Dialogue (Cadre Sectoriel de Dialogue)
CSO	Civil Society Organisation
CSPS	Health and Social Promotion Centre (Centre de Santé et de Promotion Sociale)
CVD	Village Advisor for Development (Conseiller Villageois de Développement)
DAL	Open Defecation (Défécation à l'Air Libre)
DANIDA	Danish International Development Agency
DAO	Tender document (Dossier d'Appel d'Offre)
DGA	General Directorate for Sanitation (Direction Générale de l'Assainissement)
DGEP	General Directorate for Drinking Water (Direction Générale de l'Eau Potable)
DGESS	General Directorate for Sectoral Studies and Statistics (Direction Générale des Etudes et des Statistiques Sectorielles)
DREA	Regional Directorate for Water and Sanitation (Direction Régionale de l'Eau et de l'Assainissement)
DSTM	Direction of Municipal Technical Services (Direction des Services Techniques Municipaux)
DWS	Drinking Water Supply
GDP	Gross Domestic Product
HRBA	Human Rights-Based Approach
HT	Duty Free (Hors Taxes)
IEC	Information, Education, Communication (Information, Éducation Communication)
IMS	Social intermediation (Intermédiation Sociale)
INO	National Inventory of Hydraulic Infrastructures (Inventaire National des Ouvrages Hydrauliques)
IRC	International Centre for Water and Sanitation (former International Reference Center on Community Water Supply)
IWA	International Water Association
IWRM	Integrated Water Resources Management
JMP	Joint Monitoring Program (Joint UNICEF-WHO monitoring programme)
KFW	German Credit Agency for Reconstruction and Development

ACRONYMS	DEFINITIONS
LCCA	Life Cycle Cost Approach
LLTS	Leader-Led Total Sanitation
MATD	Ministry of Territorial Administration and Decentralisation (Ministère de l'Administration Territoriale et de la Décentralisation)
MEA	Ministry of Water and Sanitation (Ministère de l'Eau et de l'Assainissement)
MINEFID	Ministry of Economy, Finance and Development (Ministère de l'Economie, des Finances et du Développement)
Munyu	Women-led civil society association
NGO	Non-Governmental Organisation
OCADES	Catholic Organisation for Economic and Social Development (Organisation Catholique pour le Développement Economique et Social)
ODF	Open Defecation-Free
ONEA	National Office for Water and Sanitation (Office National de l'Eau et de l'Assainissement)
PACT	Support programme for Local and Regional Authorities (Programme d'Appui aux Collectivités Territoriales)
PCD	Communal Development Plan (Plan Communal de Développement)
PCD-AEPA	Communal Development Plan for Drinking Water Supply and Sanitation (Plan Communal de Développement d'Approvisionnement en Eau Potable et Assainissement)
PEM	Modern Water Point (Point d'Eau Moderne)
PMH	Manually-Operated Pump (Pompe à Motricité Humaine)
PN-AEP	National Programme for Drinking Water Supply (Programme National d'Approvisionnement en Eau Potable)
PN-AEUE	National Programme for Wastewater and Excreta Treatment (Programme National d'Assainissement des Eaux Usées et Excrétas)
PN-AH	National Programme for Water Development (Programme National d'Aménagement Hydraulique)
PNDES	National Plan for Economic and Social Development (Plan National de Développement Economique et Social)
PN-GEA	National Programme for Water and Sanitation Sector Governance (Programme National de Gouvernance du Secteur Eau et Assainissement)
PN-GIRE	National Programme for Integrated Water Resources Management (Programme National de Gestion Intégrée des Ressources en Eau)
PSC-SPEA	Communal Strategic Plan for Public Drinking Water and Wastewater and Excreta Treatment Services (Plan Stratégique Communal de Services Publics d'Eau Potable et d'Assainissement des Eaux Usées et Excrétas)
RSE	Corporate Social Responsibility (Responsabilité Sociale de l'Entreprise)
SAGE	Water Development and Management plan (Schéma d'Aménagement et de Gestion de l'Eau)
Sanithon	Call for Funding for Sanitation (Appel à Financement pour l'Assainissement)
SDAGE	Master plan for Water Development and Management (Schéma Directeur d'Aménagement et de Gestion de l'Eau)
SDAU	Master Plan for Development and Town Planning (Schéma Directeur d'Aménagement et d'Urbanisme)
SDG	Sustainable Development Goal
SN-SOSUCO	Société Nouvelle – Société Sucrière de la Comoé
SWOT	Strengths, Weaknesses, Opportunities and Threats
TFP	Technical and Financial Partner
ToR	Terms of reference
TTC	All taxes included (Toutes Taxes Comprises)
WASH	Water, Sanitation and Hygiene
Water Aid	British humanitarian NGO for water and sanitation
WOUOL	Regional NGO established in Bérégadougou
WUA	Water Users Association

INTRODUCTION

The government of Burkina Faso, through its national drinking water supply and wastewater and excreta treatment programs 2016-2030, has committed itself to the Sustainable Development Goals, which aim, among other things, to universal access to drinking water and sanitation services by 2030.

Given this new dynamic, it seems wise to provide the commune with a programmatic tool enabling it to put national ambitions into operation on the scale of its administrative territory, in accordance with the SDG6.

It is important to recall that in Burkina Faso, the missions of the communes, in terms of WASH, are governed by laws and decrees. These include:

- Act No. 055-2004/AN of 21 December 2004 on the general code of local and regional authorities in Burkina Faso, together with its amendments.
- Decree No. 2009-107/PRES/PM/MATD/MAHRH/MEF/MFPRE of 30 March 2009, transferring powers and resources from the State to municipalities in the fields of WASH.

Specifically, with regard to WASH, Article 103 of the revised General Code of Local and Regional Authorities¹ in December 2009 stipulates that the municipalities receive the following powers:

- opinion on the water supply master plan ;
- participation in the production and distribution of drinking water;
- construction and management of wells, boreholes and standpipes;
- development and implementation of local drinking water supply and sanitation plans ;
- participation in the preparation, approval, implementation and monitoring of Water Development and Management Master Plans (SDAGE) and Water Development and Management Plans (SAGE).

Consequently, the State has undertaken the progressive transfer of the human, financial and material resources necessary for the execution of the missions, now devolved, to the municipalities.

¹ General Code of Local and Regional Authorities of 21 December 2009

The strategic planning approach used was based on Burkina Faso's methodological guides for developing sector-based policies.

It followed a participatory process, drawing on ONEA's experience as a reference in Burkina Faso in the development and sustainable management of drinking water and sanitation services in urban areas. This strategic plan is structured in two parts:

- the diagnosis of the current provision of water and sanitation services which presents (i) the profile of the municipality, (ii) the socio-economic determining factors of WASH services, (iii) the communal governance of WASH services, (iv) the provision of drinking water services, (v) the provision of wastewater and excreta treatment services, (vi) the financing of drinking water supply and wastewater and excreta treatment; (vii) the strengths, weaknesses, opportunities and threats of WASH services, as well as (viii) the stakes and challenges.
- the communal strategy for universal access to drinking water and wastewater and excreta treatment services, which talks about (i) the foundations of the communal strategy, (ii) the goals pursued by the municipality, (iii) the main changes to be made, (iv) the enabling factors to be activated, (v) the areas of focus and (vi) the implementation and monitoring and evaluation mechanisms.

1. DIAGNOSIS OF ACCESS TO DRINKING WATER AND WASTEWATER AND EXCRETA TREATMENT

The diagnosis focused on the analysis of the conditions related to water and sanitation services management as well as the way they work. The summary below deals with:

- Socio-economic determining factors of WASH services;
- Governance of the sector and the services offered as far as WASH is concerned;
- The provision of drinking water services;
- The provision of wastewater and excreta treatment services;
- Financing of drinking water supply and wastewater and excreta treatment;
- Strengths, weaknesses, opportunities and threats of WASH services;
- Stakes and challenges.

In addition, the diagnosis of the performance of WASH services was made from two viewpoints, namely:

- According to the standards and criteria that have prevailed so far within the MDGs framework, where access rates to WASH facilities are discussed;
- According to the standards and criteria now underlying SDGs² 6.1 and 6.2, where each service is assessed on the basis of a new evaluation scale developed for this purpose by the Joint Monitoring Programme (JMP)³.

	Drinking water	Wastewater and excreta treatment	Handwashing
Rating scale of the service ⁴	1. Safely managed	1. Safely managed	1. Basic facilities
	2. Basic (or elementary)	2. Basic (or elementary)	2. Limited facilities
	3. limited	3. limited	
	4. Unimproved	4. Unimproved	3. No facilities
	5. No service	5. No service	

The ideal performance expected in the pursuit of SDGs 6.1 and 6.2 is measured by the core indicators shown in the table below.

Sub-sector	Target	Core indicators
Drinking water supply	6.1 : By 2030, achieve universal and equitable access to safe and affordable drinking water for all	- Proportion of population using safely managed drinking water services - Proportion of pre-schools, primary and secondary schools with access to water from an improved source within the school. - Proportion of health facilities with access to water from an improved source on their premises.
	6.2 : By 2030, achieve access to appropriate and equitable	- Proportion of population using safely managed sanitation services, including a hand-washing facility with water and soap.

² Source: Safely managed drinking water, UNICEF-WHO, 2017.

³ Joint Monitoring Programme on the achievement of SDGs 6.1 and 6.2 by UNICEF-WHO.

⁴ Source: JMP 2017 - WASH in Agenda 2030, the new global indicators for water, sanitation and hygiene.

Wastewater and Excreta treatment

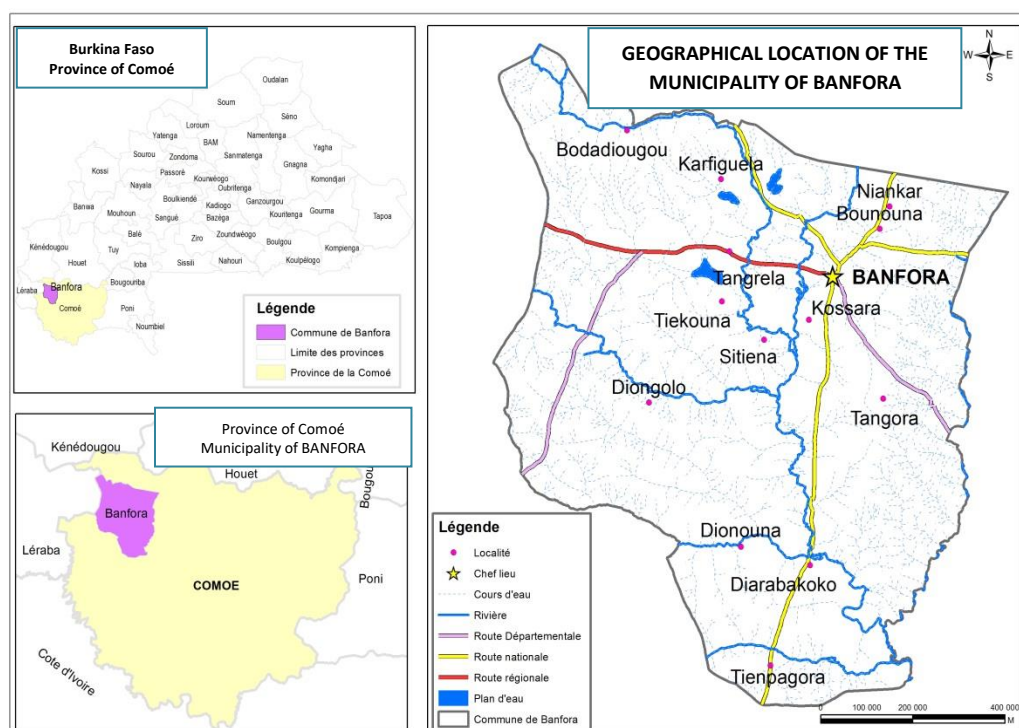
sanitation and hygiene for all and end open defecation, paying a special attention to the needs of women and girls and those in vulnerable situations

- Proportion of pre-schools, primary and secondary schools with access to improved and operational toilets within the school, meeting Handi-Sex-specific standards.
- Proportion of pre-schools, primary and secondary schools that have a hand-washing facility with soap and water available on their premises.
- Proportion of health facilities with access to improved and operational toilets on their premises that meet Handi-Sex-specific standards.
- Proportion of health facilities that have a hand-washing facility with soap and water available on their premises.

Source: JMP 2017 - WASH in Agenda 2030: The new global indicators for water, sanitation and hygiene. UNICEF-WHO

1.1. Profile of the municipality

The map and table below present the profile of the municipality of Banfora which was the subject of this diagnosis.



Source: BNDT 2014

May 2016

Produced by: IRC

Items	Data or information
Status	Urban municipality
Surface area	934 km ²
Number of villages and sectors	22 villages and 15 urban areas
Population in 2017	153,574 inhabitants
Projected population in 2030	235,041 inhabitants
Regional incidence of poverty	22.7%
Access to drinking water	Access to approved facilities ⁵ 69%

⁵MDGs approach

	Safely managed drinking water ⁶	0%
Access to wastewater and excreta treatment	Access to approved facilities	28%
	Safely managed wastewater and excreta treatment	0%
Water resources	Surface water: The Tingrela lake, "Moussodougou", "Toussiana" and "Lobi" dams built on the Comoé river ; Groundwater: Boreholes.	
2017 Budget	CFAF 1,006,759,582	
Potential partners of the municipality	KfW, IRC BF, ONEA, Danida, WaterAid and "Munyu" association	

Various sources: NISD, 2009 (population & incidence of poverty) and strategic diagnosis data, 2017

1.2. Socio-economic determining factors of WASH services

The result of the diagnosis indicates social and economic factors that determine the development of WASH services in the municipality of Banfora. These include, among others:

- the rapid population growth in the region which foreshadows an increase of 65% of the population by 2030. This is linked in particular to immigration. Several villages will become agglomerations of more than 5,000 inhabitants, due to immigration;
- the increasing urban development which led the municipal authorities to carry out several allotment operations between 1935 and 2005;
- the level of schooling of the population, given that the more young people attend school, the more plausible is the demand for WASH services and the adoption of good practices relating to them. The regional gross enrolment rate is 79.3%, the net enrolment rate 66.3% and the post primary enrolment rate 46.6%. However, by 2030, the continuing efforts of the State and its partners to build primary and high schools will make it possible to expect a very significant improvement about the situation;
- the organisational and socio-cultural dynamic which is characterised by: (i) a weak community organisation in the form of associations, especially in rural areas; (ii) a poor open-mindedness to the demand for WASH services and to the proper use of the facilities, due to the ignorance of the rights to drinking water and sanitation and the reciprocal responsibilities of the parties involved; (iii) low and slow adoption of good practices by part of the population due to the ignorance of the harmful consequences of non-drinking water consumption and the absence of hygiene and sanitation. However, there is a strong willingness among the populations to share the resource between localities, which makes

⁶See core indicators (SDG6) in the table above.

it possible to expect different forms of mutualisation;

- the monetary poverty of the population, because, along the lines of the Cascades region, 22.7%⁷ of the population of Banfora lives below the regional poverty line, which is estimated at CFAF 267,780⁸. Thus, a household composed of 10 persons (adults and children) living at the level of the regional monetary poverty line would have at most CFAF 2,500⁹ per day to cover its non-food¹⁰ expenses, including health, education, transport, housing, clothing and sanitation. This clearly shows the financial constraints faced by poor households. However, the Cascades region, and particularly the municipality of Banfora has shown strong economic dynamism over the last ten years. This results in the development of agricultural production, agri-food processing and tourism activities. This development which provides employment and income opportunities to the population, will reduce the incidence and depth of poverty.
- the competition between the different things that water is used for, for the commune of Banfora is characterised by the development of economic activities (agriculture, breeding, crafts or industry) that require regular access to water. There is a strong competition between the different things that water is used for, namely: drinking water supply and other activities including mining;
- the control of public action by citizens is almost non-existent in rural areas. In urban areas however, this control, although shy and non-structured, is carried out by groups or organisations.

1.3. Communal governance of WASH services

At the national level, the building up of communal governance is essentially driven by the State and its partners within the framework of national programmes. As mentioned in the introduction, at the communal level, the town hall is responsible for the provision of WASH services. At this level, the diagnosis shows that the town hall of Banfora commune is characterised by:

- the weak commitment of the municipal authority which is the expression of a weak organisation of the departments in charge of WASH and their weak allocation in human, financial and material resources;

⁷NISD (National Institute for Statistics and Demography) - Poverty and inequality profile 2015 – OMS (Ongoing Multisectoral Survey) 2014.

⁸NISD - Poverty and inequality profile 2015 - OMS 2014.

⁹ $2500 = ((267\,780 * 10) / 365) * 0,34$. According to NISD's poverty profile, an adult's non-food expenditure is in the range of 34% (0.34) of his total expenditure.

¹⁰NISD - Poverty and inequality profile 2015 - OMS 2014: 66% of family income is allocated to food needs and 34% to non-food needs (education, health, housing, clothing and others).

- the absence of strategy for mobilising financing for WASH in order to meet the growing demand for services;
- the absence of agreement or contract documents or the fact that they are insufficiently used to govern the relationships with operators of Drinking Water Supply (DWS) services such as ONEA, Simplified Drinking Water Supply (AEPS) managers, Water Users Associations (WUAs), maintenance staff and public latrine managers;
- the weak monitoring and evaluation, the lack of communication and accountability to citizens and the low level of moderation of the WASH stakeholders' consultation.

In short, the municipal institutional framework is not very operational in terms of WASH. The town hall of Banfora has not yet fully endorsed its mandate, although some initiatives exist, that have not yet been operational.

1.4. Provision of drinking water services

Knowledge of water resources (surface and groundwater) is not exhaustive in the Cascades region.

The drinking water supply to the municipality of Banfora is based on surface water and groundwater from boreholes. In urban areas, water supply uses a conventional drinking water supply system from the Moussodougou dam. In rural areas, two (02) simplified drinking water supply (AEPS) systems and 227 boreholes equipped with hand pumps (INO, 2016) are used to supply drinking water.

1.4.1 Performance of drinking water supply to households

- ❑ Based on the MDGs criteria, the households' gross access rates to drinking water are 75.6% for rural and semi-urban areas (INO, 2016) and 100% for the urban area (ONEA 2016). Overall, access to drinking water facilities is estimated at 92.3%¹¹ which is broken down as follows:
 - 39.1% to private connections;
 - 32.3% to standpipes;

¹¹The overall access rate was calculated on the basis of the population served (rural + urban) as a proportion of the total population of the municipality.

- 17.1% to manually-operated pumps;
- 3.8% to wells;
- 7.7% of the population of the municipality of Banfora still uses water from non-drinkable sources.

□ According to the SDG 6.1, the assessment of the service performance is based on the service approach. The service levels to be considered are as follows:

Service level	Description
Safely managed Service (N5)	Drinking water from an improved water source which is located on the premises, available when needed and free of faecal (and priority chemicals) contamination.
Basic or elementary service (N4)	Drinking water from an improved source, with collection time that is not more than 30 minutes for a roundtrip including queuing.
Limited service (N3)	Drinking water from an improved source with collection time that exceeds over 30 minutes for a roundtrip including queuing.
Unimproved Service (N2)	Drinking water from an unprotected dug well or unprotected source.
No service (N1)	Drinking water collected directly from a river, dam, lake, pond, stream, canal or irrigation channel.

Source: JMP 2017 - WASH in Agenda 2030: The new global indicators for water, sanitation and hygiene. UNICEF-WHO

Three parameters were used to assess the quality of services, (i) physical accessibility, (ii) availability of water (measurement of continuity of service), (iii) quality of distributed water (assurance that it is drinkable). The current situation of Drinking Water Supply according to the SDG 6.1 in the municipality of Banfora is as follows (2016):

Service level	Rate of access to services
Safely managed service	0%
Basic (or elementary) service	68,99%
Limited service	0,12%
Unimproved service	23,34%
No service	7,56%

The main finding is that "the proportion of the population using safely managed drinking water in the municipality of Banfora is equal to zero"(core indicator of SDG 6.1). This situation is confirmed by the access rates according to the JMP 2017 approach (UNICEF-WHO) at national level.

1.4.2 Performance of drinking water supply in schools and health facilities

- ❑ According to the MDGs approach, the rate of provision in drinking water points in schools is 36.96%¹² and 100% (Diagnostic Report, 2017) in health facilities.
- ❑ From the SDG 6.1 perspective and according to defined service levels (JMP, 2016), performance is as follows:

Service level	Schools	Health facilities
Improved Service	0%	0%
Basic Service	0%	0%
Limited Service	36.96%	100%
No service	63.04%	0%

1.5. Provision of wastewater and excreta treatment services

Performance of family sanitation

- ❑ The diagnosis¹³ reveals that with regard to households' access to excreta treatment facilities from the MDGs perspective, the rates are as follows:
 - 28% of households are equipped with approved facilities;
 - 4% of households share approved latrines with their neighbours;
 - 60% of households are equipped with traditional latrines;
 - 8% of households practise open defecation;

As far as grey water is concerned:

- 6% of households collect wastewater in septic tanks and leach pits;
- 94% of households discharge their wastewater onto the street and open spaces and into the plot;

As far as handwashing is concerned, very few households are equipped with handwashing facilities.

The act of emptying full pits is dominated by unhygienic manual practices. More than 90% of the sludge is discharged raw into the environment.

¹²Regional data: CRP/PN-AEPA 2016 report

¹³Households survey results, 2017

From the perspective of the SDG 6.2, based on the "safely managed sanitation" service approach, the service levels to be considered are as follows:

Service Level	Description
Safely managed Service (N1)	Adequate individual toilets per user unit avoiding contamination of the environment by on-site or off-site treatment, plus hand washing.
Basic or elementary service (N2)	Adequate individual toilets per user unit but without access to an appropriate treatment plant.
Limited service (N3)	Appropriate shared toilets
Unimproved service (N4)	Toilets involving risks of human contamination (traditional latrines)
No service (N5)	No service - open defecation

Source: JMP 2017 - WASH in Agenda 2030: The new global indicators for water, sanitation and hygiene. UNICEF-WHO

Three parameters were used to assess the quality of sanitation services, (i) physical accessibility to an approved, non-shared containment facility, (ii) access to a hygienic destocking service, and (iii) treatment or recycling of wastewater and excreta, in situ or in a plant. The current situation of the wastewater and excreta treatment according to the SDG 6.2 in the municipality of Banfora is as follows (2016):

Service level	Rate of access
Safely managed service	0%
Basic (or elementary) service	28%
Limited service	4%
Unimproved service	60%
No service (Open Defecation)	8%

No resident of the municipality of Banfora has access to a safely managed wastewater and excreta treatment service.

Performance of sanitation in schools, health centres and other public places

- ❑ Based on the MDGs criteria, with regard to equipping primary schools, health facilities, public places and places of worship, the rates (Diagnostic Report, 2017) are as follows:
 - 92.3% of primary schools;
 - 91% of health facilities;
 - 50% of public places (stations and markets);

- 100% of places of worship.
- From the perspective of the SDG 6.1, where approved latrines exist, the service is limited because facilities are poorly maintained and often out of service. Those who build the facilities do not take into account the specific needs of women, girls, the elderly or people living with a disability.

Service level	Primary schools	Health facilities	Places of worship	Other public places (stations, markets etc.)
Improved Service	0%	0%	0%	0%
Basic Service	0%	0%	0%	0%
Limited Service	92,3%	91%	100%	50%
No service	7.7%	9%	0%	50%

As far as hygiene is concerned, the majority of schools and health facilities are not equipped with hand washing facilities. As a result, 78% of them are without hygiene services and the remaining 22 % ends up with a limited service.

Overall, the results show that almost 100% of wastewater and excreta are discharged in one form or another into the nature without treatment, with proven risks to human health and the environment. The act of emptying full pits is dominated by unhygienic manual practices. Some of the sludge that is emptied is reused in agricultural fields, without any hygienic precautions.

1.6. Financing of WASH services

The analysis of the data collected from stakeholders during the diagnosis shows that households are the largest contributors to the financing of WASH in the municipality of Banfora through the money they pay for the services, at the rate of 66%. The remainder is divided between the contribution from the State's own budget (13%) and grants and subsidies from intergovernmental organisations and NGOs (21%). The contribution of the municipality, limited to the salaries paid to its own staff, is very low.

The drinking water supply sub-sector absorbs 80% of the sector's financing while the sanitation sub-sector only takes 6% of total financing. The remaining 14% is spent on institutional support.

At the communal level, there is no budget allocation for WASH. However, the municipality bears several expenses related to WASH which are not counted as such. The most important ones are the salaries of the agents, the costs related to the supervision missions in the villages and the ones related to the organisation of the stakeholders' meetings.

In addition, the resources mobilised with regard to WASH are used to finance operations first, and then, investments, development of services, renewal and rehabilitation and direct and indirect support.

1.7. Strengths, Weaknesses, Opportunities and Threats of WASH Services

1.7.1. Strengths and weaknesses

The main strategic strengths and weaknesses related to the development of WASH, which emerge from the diagnosis are summarised in the table below.

Strengths and weaknesses of the provision of WASH services in Banfora

Fields	Strengths	Weaknesses
Governance	<ol style="list-style-type: none"> 1. WASH services led by qualified staff within the Direction of Municipal Technical Services (DSTM); 2. Farming out the management of public latrines; 3. Endogenous dynamics in villages in favour of taking charge of WASH issues; 4. Accountability by the municipality. 	<ol style="list-style-type: none"> 1. Weak performance of communal supervision of infrastructures, due to the non-functioning of the partnership agreement with ONEA, the insufficient implementation of planning documents and poor monitoring and evaluation by all stakeholders; 2. Weak performance of citizen's control of public action; 3. Weak participation of associations in the promotion of WASH.
Provision of drinking water supply services	<ol style="list-style-type: none"> 1. Strong willingness of households to pay for an improved service in urban and rural areas; 2. Professional management of urban water services by ONEA; 3. Proper functioning of the Association for the Development of Drinking Water Supplies (ADAE). 	<ol style="list-style-type: none"> 1. Significant shortage of water resources; 2. Low satisfaction of the demand for Drinking Water Supply (DWS) services ; 3. Low efficiency of the management of Drinking Water Supply (DWS) systems in rural areas ; 4. Inconsistency of the water service in rural areas.
Provision of wastewater and excreta treatment services	<ol style="list-style-type: none"> 1. Participation through various initiatives of informal and formal private operators in the management of sludge; 2. Existence of a land site that can be used by the Commune to build the sludge treatment and recycling plant. 	<ol style="list-style-type: none"> 1. Large proportion of households equipped with unapproved facilities (traditional latrines); 2. Non-existence of wastewater and faecal sludge treatment and/or recycling plants; 3. Non-adoption of good hygiene and sanitation practices by the majority of the population.
Financing of WASH	<ol style="list-style-type: none"> 1. The large contribution of users to the financing of the WASH sector. 	<ol style="list-style-type: none"> 1. Low budget allocation to the development of WASH services by the commune; 2. Lack of strategy for mobilising resources.

1.7.2. Opportunities and threats

With the aim of achieving the SDG 6.2, the diagnosis highlights opportunities to be exploited and threats to be countered, which are summarised in the table below.

Opportunities and threats of the provision of drinking water services in Banfora.

Fields	Opportunities	Threats
Governance	<ol style="list-style-type: none"> 1. Ministry of Water and Sanitation to implement the roadmap for Assistance to the Municipal Project Management 2. Public-private partnership as a way to create and manage WASH services. 	<ol style="list-style-type: none"> 1. Tendency of young people to show mistrust towards the communal authorities 2. Lack of control over the development of inhabited spaces in urban and rural areas; 3. Increase in communitarian identities; 4. Crystallisation of political differences among local elected officials. 5. Inequity between urban, rural and peri-urban areas in terms of the provision of WASH services.
Provision of drinking water supply services	<ol style="list-style-type: none"> 1. Implementation of programmes to achieve the SDGs: PN-AEP, P-GIRE; 2. Implementation of the ONEA Strategic Plan (2016-2020); 3. Adoption of Human Rights Based Approach (HBRA) and the service approach by national authorities; 4. Involvement of teaching and health staffs in the management of WASH services; 5. The advantages of equalisation and mutualisation of functions offered by networked service operators (ONEA and ADAE). 	<ol style="list-style-type: none"> 1. Lack of knowledge of the real potential (quantity and quality) of water resources; 2. Increased competition between the different things water is used for; 3. Low availability and high cost of electrical energy; 4. Impact of climate change on water resources
Provision of wastewater and excreta treatment services	<ol style="list-style-type: none"> 1. Existence of innovative approaches for the promotion of Wastewater and Excreta Treatment (AEUE): CLTS, LLTS, Sanithon, Fasotoilettes; 2. Implementation of programmes to achieve the SDGs: PN-GEA, PN-AEP, PN-AEUE, P-GIRE; 3. Potential for reusing the sanitation by-products in agriculture; 	<ol style="list-style-type: none"> 1. Pollution of water resources by industrial, artisanal and agricultural activities
Financing of WASH	<ol style="list-style-type: none"> 1. Political commitment to fight for universal access to WASH: Visions "Zéro corvée d'eau" (Zero Water Chore) and 80% ODF (Open Defecation Free), by the President of Burkina Faso; 	<ol style="list-style-type: none"> 1. Relatively high impact of poverty 2. Weak ability to mobilise the financial resources of the municipality.

2. Willingness of TFPs to support the WASH sector in the development of services (State, NGOs, multilateral and bilateral cooperation, decentralised cooperation);
3. Potential presence of mining companies with CSR programs;
4. Celebration of the Republic day (11 December 2020) in Banfora;

1.8. Stakes and challenges

Table 3: Stakes and challenges in achieving universal access to WASH services

Stakes of the municipality of Banfora vis-à-vis of WASH	Challenges to be addressed for preserving the stakes
<ul style="list-style-type: none"> ▪ The health of the population and the quality of life of households; ▪ Environmental health; ▪ Inclusive social environment and credibility of local authorities ▪ Economic productivity of the municipality 	<p>At the governance level</p> <ul style="list-style-type: none"> ▪ Leadership of the municipal authority in the provision of drinking water and sanitation services; ▪ Technical service in charge of efficient WASH; ▪ Choice of effective models for managing WASH systems: choice of scales for performing the different functions, pooling; ▪ Permanent activity of consultation frameworks and accountability platforms; ▪ Monitoring and participation of the citizens.
	<p>At the technical level</p> <ul style="list-style-type: none"> ▪ Sufficient mobilisation of water resources for drinking water supply: establishment of water production centres to ensure water availability; ▪ Continuous improvement of drinking water supply services; ▪ Capacity of operators (natural or legal person) to provide quality services; ▪ Change in the behaviour of populations in relation to WASH services; ▪ Development of wastewater and excreta treatment services.
	<p>At the financial level</p> <ul style="list-style-type: none"> ▪ Mobilisation of endogenous financing for the improvement of WASH services; ▪ Development of partnerships for financing WASH services: TFPs, public-private, decentralised cooperation, NGOs, CSOs;

2. MUNICIPAL STRATEGY FOR UNIVERSAL ACCESS TO WASH SERVICES

.A public service is an activity of general interest carried out by the administration for the good of its users with the principles of: serving everyone, everywhere, at all times, treating them fairly, making them contribute to the costs incurred by the service, adapting it to changes in habits or customs, in settlement and in techniques. It is this approach that Burkina Faso has chosen for the provision of drinking water and wastewater and excreta treatment.

The development of public services also requires a system-based approach that takes into account all links in the service value chain as well as users who are aware of their rights and duties.

It is on the basis of these considerations that (i) foundations, (ii) main changes, (iii) goals pursued by the commune, (iv) enabling factors to be activated, (v) areas of focus and (vi) implementation and monitoring and evaluation mechanisms have been developed.

2.1. Foundations of the municipal strategy

2.1.1. National and international systems of reference for WASH development

□ At the global and regional levels

The SDGs adopted in 2015 by the Member States of the United Nations constitute the frame of reference for the implementation of sustainable development at the national, sub-regional and global levels. The goal 6 on water and sanitation is to «ensure universal access to water supply and sanitation services for everyone and ensure sustainable water resources management».

At the regional level, following the AfricaSan held in 2014, African governments through the N'gor Declaration (Senegal) committed themselves in May 2015 to devoting 0.5% of their country's GDP to sanitation.

In this perspective, the development of WASH public services also requires a system-based approach that takes into account all links in the value chain of services as well as users aware of their rights and duties. It also requires the actors to make changes.

□ At the national level,

The programmatic framework is well organised into hierarchy and includes:

- **the national policy and strategy in the area of drinking water and sanitation:** the national strategies put it in the core of their actions, the act of taking institutional measures to involve all the actors, the role of the local actors (namely the municipalities as the privileged actors), the capacity building of all the actors in order to ensure the sustainability of WASH;
- **the National Economic and Social Development Plan (PNDES)** which is the national system of reference for the period 2016-2020. In its area of focus 2 "*Developing human capital*", it refers to WASH at the level of its strategic objective 2.5 "*Improve the living environment, access to water, sanitation and quality energy services*".
- **the five operational programs for the water and sanitation sector** for the period 2015-2030: PN-AEP, PN-AEUE, PN-GEA, PN-GIRE, PN-AH.

These systems of reference are based on the aspirations of the populations and the related commitments made by the government at regional and international levels.

❑ At municipal level

The framework for managing drinking water and wastewater and excreta treatment is characterised by:

- the powers transferred by the State to the municipalities for the provision of drinking water and sanitation services, which confer on them local supervision of infrastructures;
- the financial and human resources transferred to municipalities, which give them the means to perform the work of supervising the infrastructures;
- the laws organising inter-communal cooperation that allow the mutualisation of the management of WASH services.

The new programs in the field of WASH (PN-AEUE and PN-AEP) to be achieved by 2030 confirm the keeping of this strategic option.

2.1.2. Vision and principles of the municipality

❑ Vision

The vision of the communal authorities relating to drinking water supply and wastewater and excreta treatment in the perspective of the SDG 6 is:

In 2030, the dynamic communal leadership makes Banfora a reference in terms of access to sustainable drinking water and sanitation services everywhere, for everyone and at any time.

Blocks to be built	Scope	<div style="background-color: red; color: black; text-align: center; padding: 5px; border: 2px solid yellow; margin-bottom: 10px;"> Banfora is a reference </div> <div style="background-color: black; color: white; padding: 5px;"> <ul style="list-style-type: none"> ▪ Communal performance is recognised at national level and referred to as an example ▪ Banfora is one of the 10 best municipalities in terms of access to WASH </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; background-color: #90EE90; padding: 5px; text-align: center;">For all</div> <div style="border: 1px solid black; background-color: #90EE90; padding: 5px; text-align: center;">Everywhere</div> <div style="border: 1px solid black; background-color: #90EE90; padding: 5px; text-align: center;">At any time</div> </div>		
Dynamic communal leadership	<ul style="list-style-type: none"> ▪ The municipal executive authorities exercise their leadership ▪ The stakeholders participate in an organised way ▪ Municipal technical and administrative services operate in a coordinated manner 	<ul style="list-style-type: none"> ▪ Governance is inclusive: all stakeholders are educated for full involvement 	<ul style="list-style-type: none"> ▪ Public action is effective in urban and rural areas 	<p>The communal executive authorities:</p> <ul style="list-style-type: none"> ▪ regularly monitor the operation of the services ▪ regularly inform the population
Access to sustainable drinking water services	<ul style="list-style-type: none"> ▪ According to the standards, criteria and indicators in force in Burkina Faso (JMP service scale) ▪ Non-regression 	<ul style="list-style-type: none"> ▪ Any inhabitant no matter his/her social conditions: Especially vulnerable people (people with low incomes, people with disabilities and people with special needs). 	<p>Access to services is improved:</p> <ul style="list-style-type: none"> ▪ In households ▪ In schools and health facilities ▪ In places of worship ▪ In other public places: stations, markets, slaughterhouses, main roads. 	<ul style="list-style-type: none"> ▪ In rural areas, distances are reduced ▪ In urban areas, all areas, including informal settlements, are covered by distribution (Standpipes and household connections networks); ▪ the service is reliable at the level of manually-operated pumps (preventive maintenance, maintenance, corrective maintenance); ▪ The service is continuous at the level of the Simplified Drinking Water Supply and the ONEA network
Access to sustainable sanitation services	<ul style="list-style-type: none"> ▪ According to the standards, criteria and indicators in force in Burkina Faso (JMP service scales) ▪ Non-regression 	<ul style="list-style-type: none"> ▪ Any inhabitant no matter his/her social conditions: Especially vulnerable people (people with low incomes, people with disabilities and people with special needs). 	<p>Access to services is improved:</p> <ul style="list-style-type: none"> ▪ In households ▪ In schools and health facilities ▪ In places of worship ▪ In other public places: 	<ul style="list-style-type: none"> ▪ The offer of sanitation infrastructures construction service is ensured ▪ The offer of pit evacuation service is ensured ▪ Sludge or excreta are treated with the least risk to human health and the environment.

			stations, markets, slaughterhouses, main roads.	
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□ Principles

The municipality of Banfora has adopted the following principles to guide this plan. They complement or clarify the principles of national policy in the water sector as well as those of decentralisation.

Principles	Meaning
1. Accountability	<p>The main actors (town hall, decentralised technical services, service operators, NGOs/Associations) are required to give account of their actions. This means:</p> <ul style="list-style-type: none"> - The fact that accountability is achieved in three ways: information and data availability, reporting and public reporting. - Responsibility in relation to the actions of the actors, especially when they are negative. This justifies the application of a tax or fine in the case of pollution and a fee in the case of large water withdrawals, or the application of administrative or moral sanctions in the case of human rights violations;
2. Non-discrimination	Systematic and equitable consideration of all social strata and in particular vulnerable persons.
3. Delegation of responsibility	Farming out or delegating the implementation of certain actions of the plan by giving priority to local and regional competences.
4. Participation	Involvement of all social strata including the diaspora through their social, technical or financial contributions;
5. Solidarity	Valorisation of social or institutional mechanisms ensuring protection, sharing and mutualisation.

2.2. Goals pursued and merging

□ In the field of drinking water supply:

- access by the majority of the population to a safely managed service;
- access of all health facilities and schools to a basic service.

□ In the field of wastewater and excreta treatment :

- end of open defecation;
- access of all health facilities and schools to a basic service;
- access for all to a safely managed service;
- Recycling of wastewater and excreta treatment by-products.

- In terms of convergence, these goals pursued by the municipality of Banfora are at several levels, namely :
 - At the temporal level, through the achievement of national programs (PN-AEP, PN-AEUE), which guide the progress of the municipality towards achieving the results of SDG 6.
 - At the programmatic level, in the communal development plan which is the frame of reference for the programming and the conduct of actions in the field of WASH. This means that any action taken must be related to the areas of focus of the plan and contribute to the achievement of one or more of its results.
 - At the users' approach level, in the human rights-based approach that requires the taking into account of gender and vulnerable or poor people.
 - At the space-related level, through the inter-municipal cooperation for the implementation of certain activity components.

2.3. Main changes

The main changes to be made to create the conditions for achieving SDG 6 are as follows:

2.3.1. In terms of improving access to services

- make the service approach effective in both urban and rural areas. In terms of drinking water supply, it requires the quality, quantity and effective availability of water, as well as affordable prices for all categories of users. In terms of access to the wastewater and excreta treatment, the service approach includes the containment, hygienic destocking, treatment and possibly recycling, in order to reduce the risks to human health and the environment.
- take into account people with specific needs (people with disabilities, women and young girls, children) and vulnerable people;
- support the recycling of wastewater and excreta treatment by-products ;
- apply the results-based planning;
- align with the indicators for access to services in SDG 6.1 (drinking water) and SDG 6.2 (sanitation), taking into account local realities ;
- improve the mobilisation of endogenous financing in favour of WASH services.

2.3.2. At the service management level

- Take into account the human rights-based approach in WASH;
- Make the service management professional with regard to manually-operated pumps and simplified drinking water supply;
- Organize the management of the wastewater and excreta treatment sector.

2.3.3. At the level of social mobilisation

- Remove where appropriate, socio-cultural barriers that prevent sanitation and consumption of sanitation by-products from being given priority
- Include citizen's empowerment into social mobilisation.

2.4. Enabling factors to be activated

The implementation of the strategic plan requires the activation of certain enabling factors in order to speed up the process effectively, for 2030 appears constraining. It is about the leadership and the partnership.

2.4.1. The municipal leadership

Globally, the commune, through all its components, is the central actor for the smooth running of the process with the support of the State and the TFPs. In this case, the municipal council, the mayor and the municipal administration constitute the trio which must support the development of WASH services. The municipal leadership is carried by the mayor who benefits from the permanent support of the municipal council.

The Mayor and his administration are at the forefront to ensure effective access to services for the population. They are responsible for the following activities: drawing up and implementing action plans, organising and leading stakeholders, proactive collaboration with decentralised technical services, seeking funding, public procurement and monitoring and evaluating the progress of the process.

2.4.2. The partnerships

It is essential that the municipality succeeds in stimulating and developing operational partnerships enabling it to meet all the challenges. The main partnerships to be consolidated are as follows:

- partnership with other municipalities to develop the service;

- partnership with TFPs to finance infrastructure and management improvements to achieve growth, innovation and consolidation objectives;
- partnership with civil society, in particular with local community-based associations that can contribute to social mobilisation and buy-in, including the removal of socio-cultural barriers;
- partnership with natives and economic operators;
- public-private partnership, through relevant contractual arrangements, for the supply of goods, services and works as well as the management of services.

2.5. Areas of focus

Achieving SDG 6 requires (i) competent authorities committed with sufficient budgetary resources in relation to needs, (ii) professional operators motivated by the performance of their business, (iii) users aware of their rights and duties including in terms of financing the costs of services, (iv) competent, creative and responsive support structures, (v) committed financial partners, (vi) a legislative, legal and regulatory enabling framework of which the national authorities have the main responsibilities, (vii) technical and technological solutions covering all the aspects of the service supply and adapted to the demands of the populations and the geographical particularities.

The strategic plan takes into account these requirements and is structured around five (5) areas of focus. The latter are defined on the basis of a system-based approach that takes into account the requirements related to the achievement of the SDG6 and all the links in the value chain of WASH services.

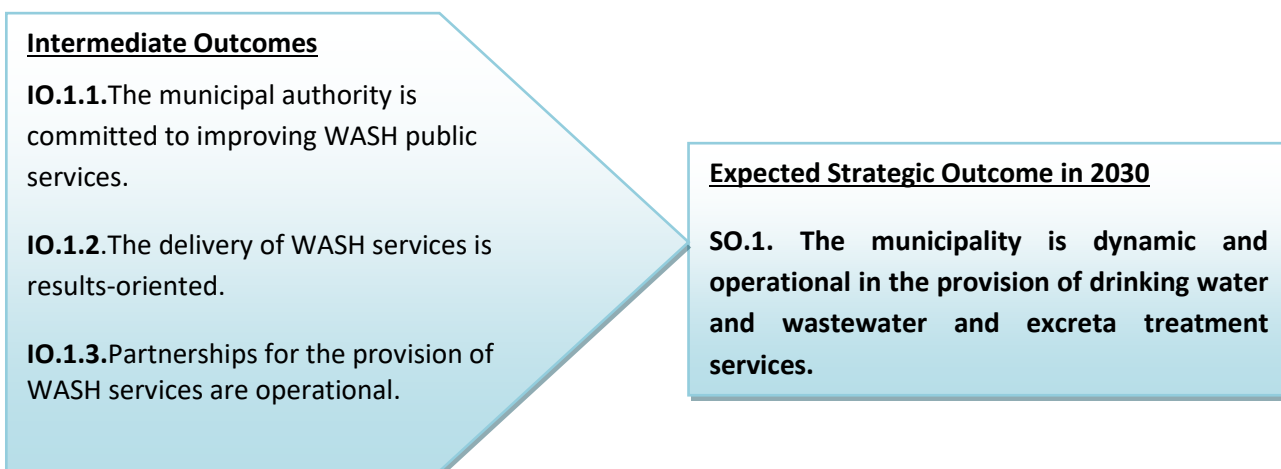
The areas of focus, complementary to each other, are as follows:

- enhancement of the institutional performance of the town hall;
- universal access to improved drinking water services;
- universal access to appropriate wastewater and excreta treatment services ;
- professional management of WASH services;
- Capacity building for citizen's participation.

2.5.1. Area of focus n°1 : Enhancing the institutional performance of the town hall

The commune must acquire the skills to be efficient in the orientation, the follow-up of the process and the quality control of the services of drinking water supply and wastewater

and excreta treatment. The achievement of three intermediate outcomes will enable the attainment of the strategic outcome inherent to the implementation of this area of focus.

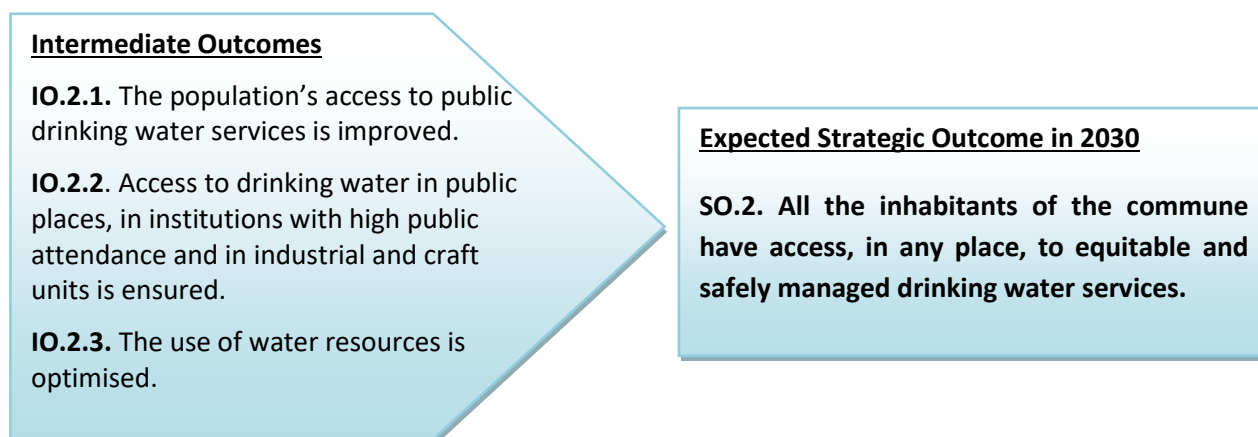


The specific objectives of the area of focus are as follows:

- building the leadership of the communal authority in the provision of drinking water supply and wastewater and excreta treatment services ;
- mobilise and stimulate the concrete commitment of the social, economic and religious leaders of the commune in favour of the objectives of the strategic plan;
- strengthen the services of the town hall (organisation and provision of the commune with human, material and financial resources);
- empower the institutional and regulatory environment for the provision of WASH services (municipal decrees for the legalisation of actions);
- develop intra and inter-communal cooperation with a view to establishing local supervision of infrastructures for WASH services;
- mobilise the necessary financial resources to implement the strategic plan;
- improve the steering and management capacities of the sub-sector in view of achieving the SDG 6.

2.5.2. Area of focus n°2: Universal access to improved drinking water services

Universal access to drinking water implies a diversified and improved supply of services, based on a quality that meets standards. This justifies the achievement of three intermediate outcomes to reach the following strategic outcome by 2030.

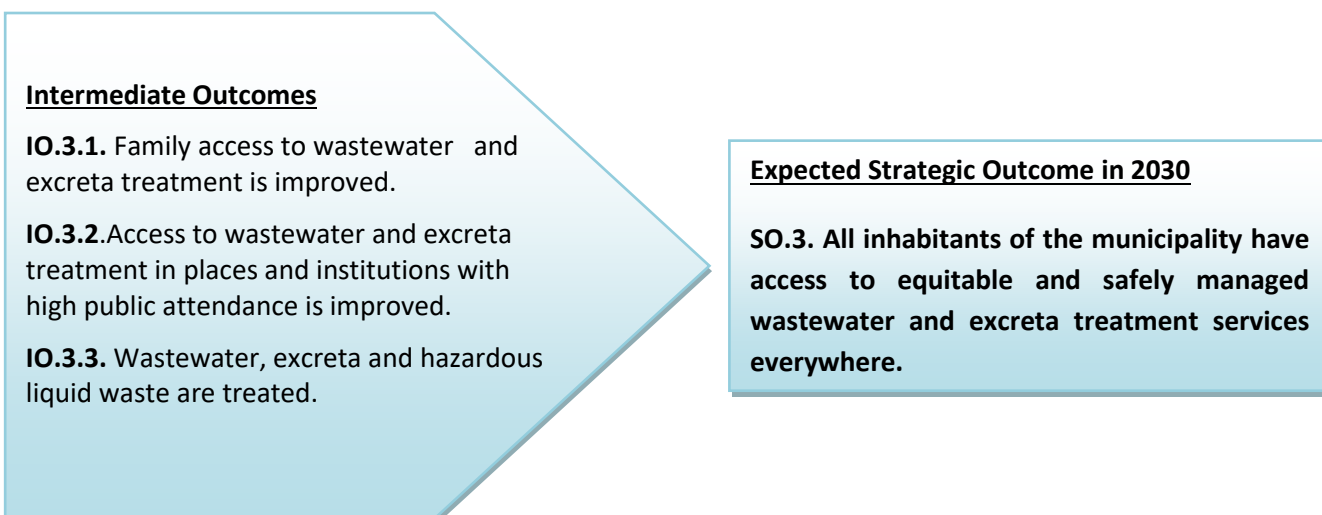


The aim is to create the physical conditions in terms of infrastructure to gradually ensure a drinking water service that is safely managed. The specific objectives of this area of focus are in line with those of the PN-AEP, namely:

- meet drinking water needs in a sustainable manner, using the human rights-based approach (HRBA);
- make water resources available to ensure continuity of service.

2.5.3. Area of focus n°3: Universal access to appropriate wastewater and excreta treatment services

Universal access to sanitation is intended to be sustainable and equitable, involving continuous diversification and improvement adapted to different specific needs. With this in mind, the three intermediate outcomes described below will make it possible to achieve strategic outcome 3 in 2030.



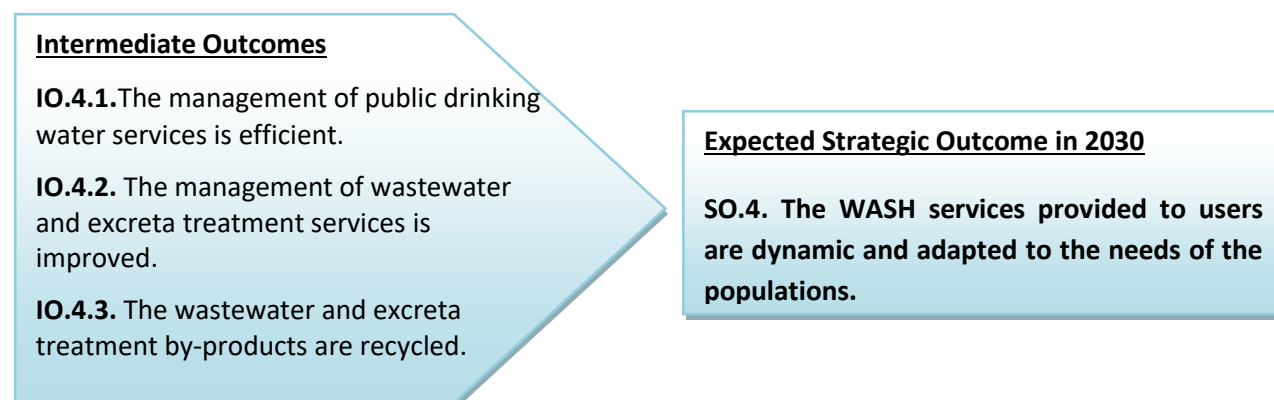
The specific objectives inherent to the achievement of this area of focus are in line with those of the PN-AEUE, namely:

- End the Open Defecation (ODF);
- Ensure a sustainable access to sanitation services for the population in line with the human rights-based approach (HRBA);
- Promote the behaviour change through sustainable adoption of appropriate hygiene practices;
- Improve the conditions for the collection, disposal, destocking, treatment and recycling of wastewater and excreta.

2.5.4. Area of focus n°4: Professional management of WASH services

The professional management of WASH services requires not only that those who are involved should exercise professionalism while providing the services but also the adoption of efficient models of management of WASH services which are adapted to the

requirements of the populations and the constraints of the operators who manage the services.

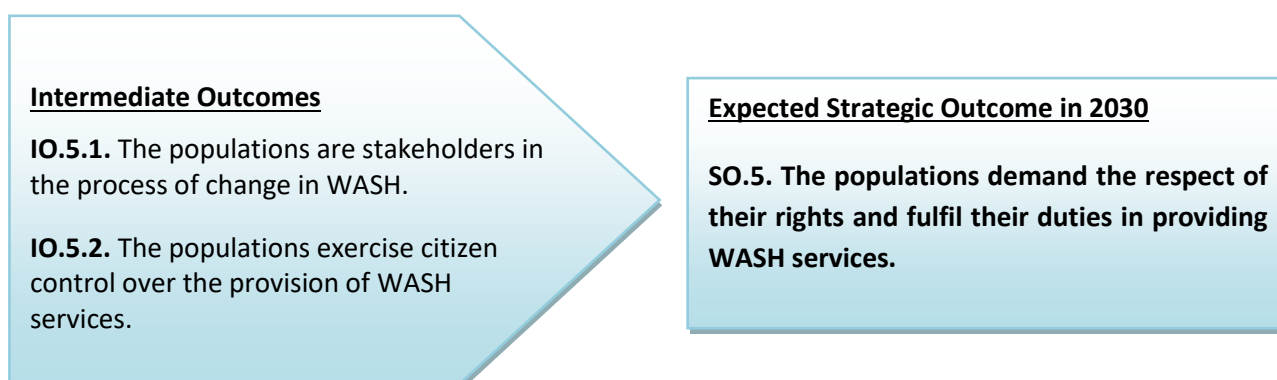


In this perspective, the commune must also equip itself with modern monitoring and control instruments of the operators of the WASH services in order to compel them to provide a quality service to the populations. This is:

- to promote the professionalization of service operators;
- to support innovations in the delivery of services;
- to support recycling initiatives of wastewater and excreta treatment by-products.

2.5.5. Area of focus n°5: Building the citizen's participation capacity

The universal access to WASH by 2030 cannot be built exclusively on the commitment of municipal authorities. The full achievement of the SDG6 targets requires the participation in the process of citizens individually or collectively through the community. From this point of view, building citizens' capacity is required. This justifies the two intermediate outcomes in order to achieve Strategic Outcome 5.



The aim is to create the conditions for the sustainability of services through the following specific objectives:

- to ensure the transparency in the management of WASH services;
- to encourage people to integrate access to drinking water and sanitation as a priority in their spending;
- to bring the populations to understand the importance of WASH in the economic and social development of the commune;
- to bring the populations to demand the respect for their rights while being aware of their respective responsibilities.

2.5.6. Dashboard of the output of the areas of focus

Established by area of focus, each dashboard makes it possible to identify the period of effectiveness of intermediate results and outputs in order to impart the achievement of the strategic outcome attached to the area of focus.

Area of focus 1: Enhancing the institutional performance of the town hall	INDICATIVE PERIOD OF IMPLEMENTATION		
	2018 – 2020	2021 - 2025	2026 – 2030
Strategic outcome 1: The municipality is dynamic and operational in the provision of drinking water and wastewater and excreta treatment services.			
IO 1.1. The municipal authority is committed to improving WASH public services.			
Output 1.1.1 Financial resources allocated by the commune to WASH are increased	x	x	X
Output 1.1.2 The commune is structured to exercise local supervision of WASH infrastructures	x		
Output 1.1.3 Regulations are updated	x		
Output 1.1.4 The commune has sufficient resources (human, financial and logistical) to manage WASH services	x	x	
Output 1.1.5 Contract templates for the management of public water supply and wastewater and excreta treatment systems are available	x	x	X
IO 1.2. The delivery of WASH services is results-oriented.			
Output 1.2.1 An annual work plan is available	x	x	X
Output 1.2.2 The moderation of consultation frameworks for the delivery of WASH services is effective.	x	x	X
Output 1.2.3 A monitoring and evaluation system for service delivery, taking into account national orientations, is operational	x	x	X
Output 1.2.4 The act of giving account to the citizens is planned and executed	x	x	X
IO 1.3. Partnerships for the provision of WASH services are operational.			
Output 1.3.1 Possibilities of intercommunal cooperation for the provision of WASH services are enhanced	x	x	
Output 1.3.2 TFPs, private sector actors, CSOs, NGOs and the diaspora fund or provide technical support to households and the commune in implementing the strategic plan	x	x	x
Output 1.3.3 Advisory support from the decentralised services of the State to the commune is effective	x	x	x
Output 1.3.4. A strategy for gathering resources for the development of WASH services is available	x	x	

Area of focus 2: Universal access ¹⁴ to improved drinking water services	INDICATIVE PERIOD OF IMPLEMENTATION		
	2018 – 2020	2021 - 2025	2026 – 2030
Strategic Outcome 2: All the inhabitants of the commune have access, in any place, to equitable and safely managed drinking water services.			
IO 2.1: The populations' access to public drinking water services is improved.			
Output 2.1.1 All households have access to a drinking water source ¹⁵	x	x	
Output 2.1.2 Households have access to improved service levels for drinking water supply ¹⁶	x	x	x
IO 2.2. Access to drinking water in public places, in institutions with high public attendance and in industrial and craft units is ensured.			
Output 2.2.1 access to drinking water is ensured in schools	x	x	
Output 2.2.2 Access to drinking water is ensured in health facilities			
Output 2.2.3 Access to drinking water is insured in public places (stations, markets, sports facilities, places of worship)			
Output 2.2.4 Efficient access to drinking water for economic units is ensured	x	x	x
IO 2.3. The use of water resources is optimised.			
Output 2.3.1: Opportunities for mobilising water resources and the pooling of drinking water production are enhanced (creation of drinking water production centres, multi-village drinking water supply).	x	x	x
Output 2.3.2: Opportunities to optimise the operation of high-potential drinking water supply facilities are enhanced.	x	x	x
Output 2.3.3: Efficiency of drinking water supply systems is enhanced (water balance, energy balance, etc.).	x	x	x
Output 2.3.4: The regulation on the water sources protection zones is applied.		x	x

¹⁴ Access by anyone, anywhere, at any time

¹⁵ It is about giving access to those who are not connected to an approved system.

¹⁶ It is a matter of moving up the levels of drinking water services towards the level of safely managed services.

Area of focus 3: Universal access ¹⁷ to appropriate wastewater and excreta treatment services	INDICATIVE PERIOD OF IMPLEMENTATION		
	2018 – 2020	2021 - 2025	2026 – 2030
Strategic Outcome 3: All inhabitants of the municipality have access to equitable and safely managed wastewater and excreta treatment services everywhere.			
IO 3.1. Family access to wastewater and excreta treatment is improved.			
Output 3.1.1 End of open defecation		X	
Output 3.1.2 households have access to improved levels of wastewater and excreta treatment services (containment, hand washing)	X	X	X
Output 3.1.3 Management of grey water is insured in households	X	X	X
Output 3.1.4 Private operators are committed to the provision of equipment and materials for building wastewater and excreta treatment facilities at family level.	X	X	X
IO 3.2. Access to sanitation in places with high public attendance is improved			
Output 3.2.1 Access to wastewater and excreta treatment is ensured in health facilities.	X	X	X
Output 3.2.2 Access to wastewater and excreta treatment is ensured in schools.	X	X	X
Output 3.2.3 Access to wastewater and excreta treatment is ensured in public places (stations, markets, sports facilities, places of worship).	X	X	X
IO 3.3. Wastewater, excreta and hazardous liquid waste are treated			
Output 3.3.1 Wastewater and excreta treatment and/or recycling systems (Sludge Treatment Systems, Sludge Recycling Systems, composting centre, sanitation sites) are available and functional in urban areas.		X	
Output 3.3.2 Wastewater and excreta treatment and/or recycling systems (composting centre, sanitation sites) are available and functional in rural areas.		X	
Output 3.3.3 Hazardous liquid waste is treated in accordance with standards in force		X	X

¹⁷Access by anyone, anywhere, at any time

Area of focus 4: Professional management of WASH services	INDICATIVE PERIOD OF IMPLEMENTATION		
	2018 – 2020	2021 - 2025	2026 – 2030
Strategic Outcome 4: The WASH services provided to users are dynamic and adapted to the needs of the populations			
IO 4.1. The management of public drinking water services is efficient			
Output 4.1.1 All public drinking water supply systems are managed under a public service delegation with a performance contract	X	X	X
Output 4.1.2 The quality of the water distributed by the urban drinking water network meets standards in force.	x	x	x
Output 4.1.3 The quality of the water distributed by the manually-operated pumps, simplified drinking water supply systems and the PEA complies with the standards in force		x	x
Output 4.1.4 The methods for home disinfection of contaminated drinking water are used by users when needed	x	x	x
Output 4.1.5 A capacity building plan for drinking water supply actors is implemented	X	X	X
IO 4.2. The management of wastewater and excreta services is improved			
Output 4.2.1 Regulations for the management of wastewater and excreta and hazardous liquid waste are applied	X		
Output 4.2.2 Users are made aware of the hygienic and appropriate use of latrines to facilitate emptying and recycling of waste water and excreta	X	X	X
Output 4.2.3 All wastewater and excreta treatment facilities are managed under a public service delegation with a performance contract	X	X	X
Output 4.2.4 The management of the wastewater and excreta facilities in schools and health facilities is organised		X	
Output 4.2.5 The wastewater and excreta disposal market is organised		X	
Output 4.2.6 Sludge is hygienically managed and treated		X	X
Output 4.2.7 A capacity building plan for wastewater and excreta treatment actors is implemented	X	X	X
IO 4.3. The wastewater and excreta treatment by-products are recycled.			
Output 4.3.1 The recycling of wastewater and excreta treatment by-products is effective.		X	X
Output 4.3.2 By-products or products derived from the wastewater and excreta treatment are controlled in accordance with the laws in force.		X	X

Area of focus 5: Building the citizen's participation capacity	INDICATIVE PERIOD OF IMPLEMENTATION		
	2018 – 2020	2021 – 2025	2026 – 2030
Strategic Outcome 5: The populations are aware of their rights and fulfil their duties in the delivery of WASH services.			
IO 5.1. The populations are stakeholders in the process of change in WASH.			
Output 5.1.1 The populations are aware of their rights and duties in relation to WASH	x	X	x
Output 5.1.2 The populations fulfil their duties as citizens (self-realisation in sanitation, contribution to water and sanitation services)	X	X	X
Output 5.1.3 Local leaders (traditional and religious authorities, opinion makers) contribute to and fulfil specific commitments for the implementation of the strategic plan	X	X	X
IO 5.2. The populations exercise citizen control over the provision of WASH services.			
Output 5.2.1 CSOs are equipped to promote citizenship in WASH	X	X	X
Output 5.2.2 Citizens (populations, CSOs, local leaders) ensure that the commitments of the actors involved in the provision of WASH services are honoured.	X	X	X
Output 5.2.3 CSOs and local leaders ensure equity, transparency, taking into account the populations' concerns and respect of the commitments of the parties involved.	X	X	X

2.5.7. Logic of the results of the strategic plan

Purpose of the Mission	MISSION Ensure access to drinking water and sanitation services throughout the municipal territory				
Vision et Principles	VISION "By 2030, the dynamic communal leadership makes Banfora a reference in terms of access to sustainable water and sanitation for all, everywhere and at any time."			PRINCIPLES Accountability Non-discrimination Delegation of responsibility Participation Solidarity	
Areas of focus	AF 1: Increase in the institutional performance of the town hall	AF 2: Universal access to improved drinking water services	AF 3: Universal access to appropriate wastewater and excreta treatment services	AF 4: Professional management of WASH services	AF 5: Building the citizen's participation capacities
Strategic Outcomes	SO.1. The municipality is dynamic and operational in the provision of drinking water and wastewater and excreta treatment services.	SO.2. All the inhabitants of the commune have access, in any place, to equitable and safely managed drinking water services.	SO.3. All inhabitants of the municipality have access to equitable and safely managed wastewater and excreta treatment services everywhere.	SO.4. The WASH services provided to users are dynamic and adapted to the needs of the populations.	SO.5. The populations demand the respect of their rights and fulfil their duties in providing WASH services.
Intermediate Outcomes	IO.1.1. The municipal authority is committed to improving WASH services	IO.2.1. The population's access to public drinking water services is improved.	IO.3.1. Family access to wastewater and excreta treatment is improved.	IO.4.1. The management of public drinking water services is efficient.	IO.5.1 The populations are stakeholders in the process of change in WASH.

	<p>IO.1.2. The delivery of WASH services is results-oriented.</p>	<p>IO.2.2. Access to drinking water in public places, in institutions with high public attendance and in industrial and craft units is ensured.</p>	<p>IO.3.2. Access to sanitation in places and institutions with high public attendance is improved.</p>	<p>IO.4.2. The management of wastewater and excreta treatment services is improved.</p>	<p>IO.5.2 The populations exercise citizen control over the provision of WASH services.</p>
	<p>IO.1.3. Partnerships for the provision of WASH services are operational.</p>	<p>IO.2.3. The use of water resources is optimised.</p>	<p>IO.3.3. Wastewater, excreta and hazardous liquid waste are treated.</p>	<p>IO.4.3. The wastewater and excreta treatment by-products are recycled.</p>	

2.6. Mechanisms for implementation and monitoring and evaluation

The successful implementation of the strategic plan depends not only on a good implementation strategy adapted to the context of the municipality but also on reliable mechanisms and the consideration given to risks and certain hypotheses that can compromise the dynamics.

2.6.1. Implementation Strategy

The implementation strategy suggests some implementation activities for the plan as well as stages for putting each of the five (05) areas of focus into operation.

□ Implementation activities:

1. The ownership of the strategic plan by communal actors. It should be based on the principle that the service approach and the human rights-based approach constitute the basis for actions inherent to the implementation of the strategic plan. As a result, the elaboration of periodic action plans will aim at proposing, at the level of each area of focus, the activities that will make it possible to consolidate and ensure the sustainable development of the achievements related to the service.
2. Development of a communication support for the strategic plan (summary note and presentation brochure);
3. Marketing the strategic plan to strategic stakeholders (local stakeholders, national authorities, potential technical and financial partners);
4. Identification and promotion of concrete funding and technical support opportunities for the implementation of the WASH strategic plan.

□ Steps to consider in building the institutional performance of the town hall

The objective is to move from an administration of WASH services to a real provision of said services, with the town hall as the contracting authority. The approach consists of:

1. Institutionalising the communal public action by setting up regulations to improve the institutional environment,
2. Organising the municipal administration to ensure results-oriented management.

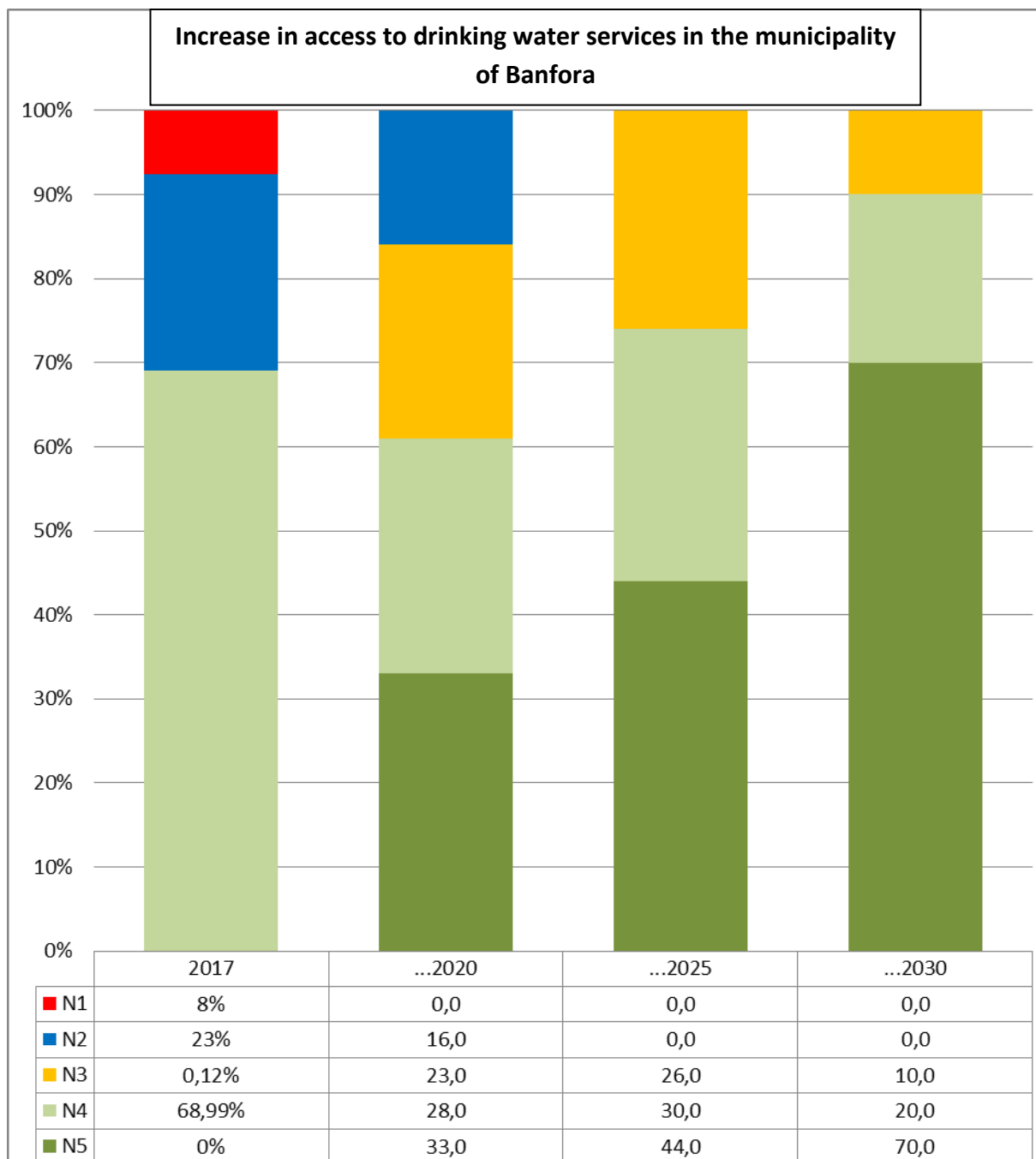
Throughout the process, the municipal authority will have to enter into a permanent negotiation process with the multitude of actors in order to strengthen its legitimacy and leadership.

□ Steps to consider in developing drinking water supply services

The approach consists in privileging actions with rapid gain in terms of access to services and mobilisation of the actors, while entering into a process of continuous improvement of the quality of the service.

The steps are:

1. ensure that all populations have access to an approved drinking water supply infrastructure by 2020;
2. ensure access for all health facilities and schools to at least the basic service by 2020;
3. ensure access to at least the basic service for more than half the population by 2025;
4. improve water availability through the creation and pooling of drinking water production centres from 2025 onwards.
5. ensure that the majority of the population has access to a safely managed service by 2030.



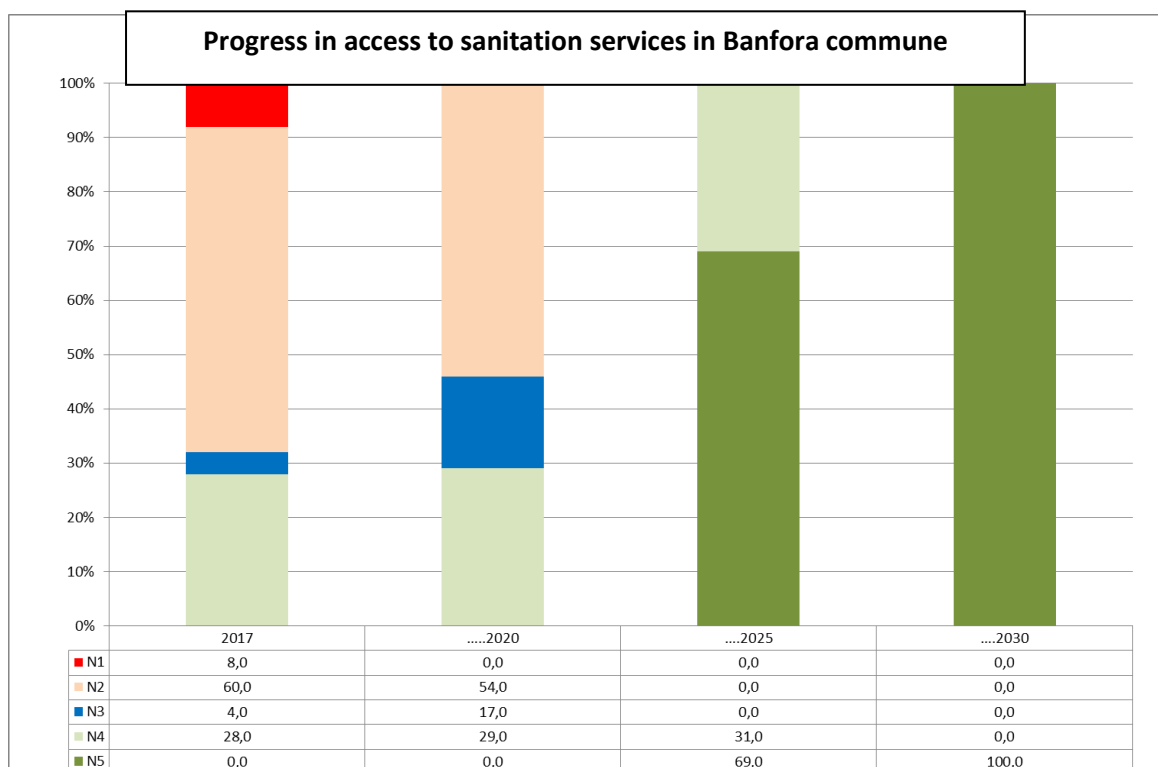
□ Steps to consider in the development of wastewater and excreta treatment services.

The approach consists in privileging actions with rapid gain in terms of access to services and mobilisation of the actors, while entering into a process of continuous improvement of the quality of the service.

The steps are:

1. End open defecation (2018-2020);

2. Ensure access to at least the basic service in all health facilities and schools by 2020;
3. ensure access for all to at least the basic service by 2025 ;
4. ensure access for all to a safely managed sanitation service by 2030 ;
5. Recycle the wastewater and excreta treatment by-products.



□ Steps to consider in professionalising management

The approach is as follows:

1. Adoption of effective models for managing WASH services ;
2. Knowledge and application of the contract terms by the municipal authority, CSOs and service operators (2021-2025);
3. Organisation of the different categories of local operators providing WASH services, from 2021.

□ Steps to consider in building citizen's participation

The steps are as follows:

1. The municipal authority, CSOs and service operators taking ownership of the service approach and the human rights-based approach (2018-2020);
2. Promotion of WASH-related rights and duties by the populations (2018-2020);

3. Exercising citizen control over the provision of WASH services from 2021.

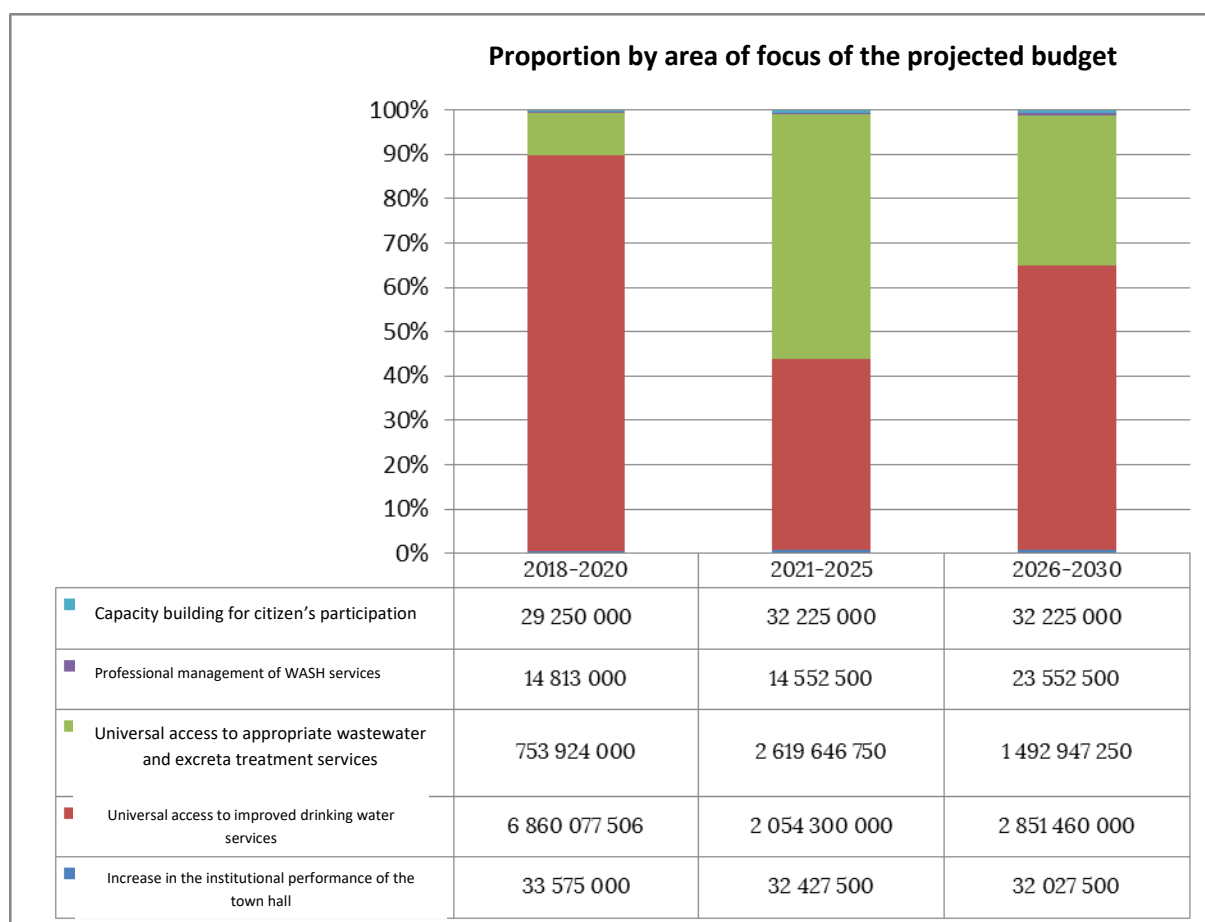
2.6.2. Estimated budget for the plan

The implementation process has made it possible to define guidelines and evaluate an estimated cost of the actions to be taken to achieve the objectives in 2030.

Investment Plan 2018-2030

Area of focus	Estimated budget (CFA Francs)			
	2018-2020	2021-2025	2026-2030	Total
Increase in the institutional performance of the town hall	33,575,000	32,427,500	32,027,500	98,030,000
Universal access to improved drinking water services	6,860,077,506	2,054,300,000	2,851,460,000	11,765,837,506
Universal access to appropriate wastewater and excreta treatment services	753,924,000	2,619,646,750	1,492,947,250	4,866,518,000
Professional management of WASH services	14,813,000	14,552,500	23,552,500	52,918,000
Capacity building for citizen's participation	29,250,000	32,225,000	32,225,000	93,700,000
Total	7,691,639,506	4,753,151,750	4,432,212,250	16,877,003,506

The first phase is devoted to the ownership and creation of an enabling environment for the implementation of the plan. The relatively high proportion of investments in drinking water supply during this period is due to the pursuit of the earlier commitment of the commune's partners.



2.6.3. Steering of the implementation

□ Bodies of implementation

Governance linked to the achievement of all the steps and activities of the plan from a results-based perspective, should involve:

- The Municipal Council
- The Mayor
- The Municipal Administration

The Mayor is the leader and responsible before the Municipal Council. He / She has the responsibility to take all measures to ensure the participation, at any level of implementation, of all directorates having competence over the implementation of the plan. These directorates are the Direction of Municipal Technical Services (DSTM), the Financial Administration and Budget Department (DAFB), the Studies and Planning

Department (DEP), the Economy and Local Development Department (DEDL) and the Communication Department.

❑ Operationalisation of the strategic plan

In accordance with the related to the convergence of the strategic plan, the latter will be achieved through:

- The development of a five-year rolling action plan, indexed to the duration of each term of office.
- Taking the plan into account in the Communal Development Plan (PDC). In this respect, the areas of focus with the results to be achieved planned within the framework of the mandate should be included in the Communal Development Plan.
- The development and implementation of an annual work plan based on the five-year action plan. The involvement of the program Budget By Objective (BPO) at the communal level will come as a valuable tool for identifying and assessing the needs as well as allocating resources.

❑ Stakeholders' consultation

Consultation between the town hall and its partners is essential. At the central level of the municipality, the Communal Water and Sanitation Committee (CCEA) is the privileged framework for monitoring consultation with all the participating municipal stakeholders, in accordance with the law that governs its functioning. The Municipal Consultation Framework (CCCo) will also be capitalised.

At village level, one general assembly per year will be the framework for exchange between users and service operators.

The main stakeholders according to their respective roles which will have to contribute to the consolidation of the steering are presented in the diagram below.



Chart: Diagram of stakeholders and their main roles

2.6.4. Monitoring and evaluation

The service in charge of water and sanitation is charged to:

- regularly monitor the implementation of the annual work plan
- update the database;
- produce quarterly activity reports.

The accounting department ensures that detailed financial statements are kept.

□ Monitoring and evaluation objectives

The objective of monitoring and evaluation is to assess the level of implementation of the annual work plan and five-year action plans.

This involves periodically reviewing the activities programmed and executed in the framework of the annual work plans and their contribution to the implementation of the five-year action plan. The specific objectives are:

- assess the functioning of the WASH communal management system in order to identify the constraints or obstacles encountered by each of the structures or bodies involved;
- assess progress towards the achievement of results;
- assess the performance of the services provided to the population;
- draw up an overall report, accompanied by proposals for decisions which will ensure the removal of the various constraints or block all kinds of risks.

□ Performance indicators and targets by 2030

The table below presents the expected performance indicators and targets.

The matrix of indicators will be accompanied by a monitoring and evaluation system, developed by the Commune, which will specify the following elements:

- The calculation mode;
- The frequency of information;
- The data source;
- The means of implementation;
- The verification mode.

Matrix of indicators and targets during the implementation of the strategic plan

Areas of focus	Expected Results	Indicators	Value of Reference	Implementation period		
				2018-2020	2021-2025	2026-2030
Area of focus 1: Increasing the institutional performance of the town hall	1. The municipal authority is committed to improving WASH services	Rate of the municipal budget allocated to WASH	0%	2%	10%	10%
		Rate of regulations intended to improve the development of WASH that are designed or revised	ND	100%	100%	100%
		Rate of physical implementation of the action plan at the end of the period	NA	100%	100%	100%
		Rate of contracts intended to improve the development of WASH that are developed or revised	ND	100%	100%	100%
	2. The provision of WASH services is results-oriented	Number of annual work plans adopted	0	3	5	5
		Rate of physical implementation of the annual work plan	NA	100%	100%	100%
	3. Partnerships for the provision of WASH services are operational	Rate of mobilisation of financial resources for the implementation of the strategic plan (indexed to the projected budget)	0%	46%	28%	26%
		Number of inter municipal cooperation projects	0	1	1	1
Area of focus 2: Universal access to improved drinking-water services	4. Populations' access to public drinking water services is improved	Rate of population using safely-managed drinking water supply services.	0%	33%	44%	70%
		Rate of pre-school, primary and secondary schools with access to water from an improved source within the school.	0%	50%	100%	100%
		Rate of health facilities with access to water from an improved source within their walls	0%	100%	100%	100%
	5. Water resources use is optimised	Rate of raw water needs coverage	ND	100%	100%	125%
	Area of focus 3: Universal access to appropriate wastewater and excreta treatment services	6. Family access to wastewater and excreta treatment is improved.	Rate of the population using safely managed sanitation services, including hand washing equipment with water and soap	0%	0%	69%
7. Access to sanitation in places and institutions with high public attendance is insured.		Rate of pre-school, primary and secondary schools with access to improved and functional toilets within the school, meeting Handi-Sex-specific standards.	0%	50%	100%	100%
		Rate of health facilities with access to improved and functional toilets within their walls that meet Handi-	0%	100%	100%	100%

Areas of focus	Expected Results	Indicators	Value of Reference	Implementation period		
				2018-2020	2021-2025	2026-2030
		Sexo-specific standards.				
		Rate of health facilities that have a hand-washing equipment with soap and water available within their walls	0%	100%	100%	100%
		Rate of pre-schools, primary and secondary schools with hand-washing facilities with soap and water available.	0%	50%	100%	100%
Area of focus 4: Professional management of WASH services	8. The management of public drinking water services is efficient	Service continuity index of manually-operated pumps.	ND	100%	100%	100%
		Service continuity index of simplified drinking water supplies	ND	95%	100%	100%
		Service continuity index of the ONEA network	ND	95%	100%	100%
		Rate of operators who meet the performance criteria defined by the municipality	ND	100%	100%	100%
	9. The management of wastewater and excreta is improved	Rate of operators who meet the performance criteria defined by the municipality	0%	100%	100%	100%
		Rate of wastewater and excreta managed without risk	0%	10%	69%	100%
10. Wastewater and excreta treatment by-products are recycled.	Number of registered operators exploiting the wastewater and excreta treatment by-products	ND	1	1	1	
Area of focus 5: Building the citizen's participation capacity	11. Populations are stakeholders in the change process in WASH.	Rate of equipment needs financed by endogenous resources	ND	10%	30%	50%
		Rate of revenue collection by operators	ND	75%	100%	100%
		Rate of adoption of good hygiene practices	ND	70%	100%	100%
	12. Populations exercise citizen control over the provision of WASH services	Rate of complaints answered by the municipal administration	ND	60%	100%	100%
		Rate of complaints answered by WASH service operators	ND	60%	100%	100%
		Number of CSOs that questioned the municipal authority on human rights issues related to water and sanitation	ND	4	5	5

2.6.5. Assumptions and Risks

□ In terms of assumptions:

- the increased leadership of the municipal authority;
- the active participation of stakeholders in the implementation of the plan;
- the availability in the short term of sufficient human resources and administrative capacity at town hall level to maintain the momentum of its development;
- the availability of financial resources to implement the plan;
- the establishment or activation of effective partnerships.

□ In terms of risks

The following risks are noted:

Risk statement	Risk criticality and mitigation strategy
Area of focus 1: Increasing the institutional performance of the town hall	
1. An inability of the municipal executive authorities to mobilise the municipal council to deliberate on the implementation of the plan	Entrust the implementation of the plan to the DREA
2. A mistrust by the populations towards the communal authority for the non-satisfaction of their WASH-related needs.	Low
3. A lack of strong commitment from the mayor in the implementation of the PSC-AEPA.	to be monitored
4. A crisis of trust (embezzlement or corruption) between the TFPs and the commune	to be monitored
5. Insufficiency of financing to cover the ambitions of the plan	to be monitored
6. A disruption in the provision of services due to terrorism-related insecurity	to be monitored
7. A delay in putting in place qualified Human Resources	Low
8. A delay in the completion of WASH-related investments and the respect of the commune's commitments	Hire an executive agency to reduce delays; Apply public contract management procedures diligently.

Risk statement	Risk criticality and mitigation strategy
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Area of focus 2: Universal access to improved drinking water services

1. Insufficiency of water resources for supplying drinking water to the city of Banfora	<ul style="list-style-type: none"> - Analyse the water balances of the different uses - Apply the provisions of the IWRM
2. Accidental pollution of the water from the Moussodougou dam	to be monitored

Area of focus 3: Universal access to appropriate wastewater and excreta treatment services

1. Sanitation services developed by the private sector are not financially accessible to the population.	to be monitored
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Area of focus 4: Professional management of WASH services

1. A low attraction of private operators for the management of drinking water or sanitation services	to be monitored
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Area of focus 5: Citizen empowerment

1. Corruption within the CSOs	Low
2. A crisis of trust between the commune and CSOs during the process of citizen monitoring and control	Low
3. A political exploitation of the CSOs against the communal executive authorities	to be monitored



Technical and financial support

