Every Water1st project includes piped water, toilets, hygiene education, community organizing, and management training.

Worldwide, 35-50% of water projects fail within the first 5 years. **WE HAVE COMPLETED 2,178 PROJECTS - AND NOT ONE HAS FAILED.** We know this because we follow-up with consistent project monitoring.

**COMMUNITY EMPOWERMENT & OWNERSHIP ARE KEY.**

Community members receive extensive training to build, operate, and maintain their projects in perpetuity. Our projects are designed to serve the whole community: homes, schools, health clinics, and community centers all receive water and toilets. This comprehensive, cost-effective approach has the greatest health and economic impacts on a community.

**WOMEN PLAY AN INTEGRAL PART.**

Women serve in key leadership roles in the governance and maintenance of their water and sanitation systems. Women receive the greatest direct benefit from a water project and have the most incentive to keep it operating. It makes sense to give them control of day-to-day operations. Having a role as a water committee member or hygiene promoter enhances women’s skills, making them stronger, more respected community members.

**CONSISTENT SUPPORT PROMOTES EXCELLENCE.**

We implement projects in collaboration with our local partner organizations and provide them with stable, consistent funding. Each local office employs water, sanitation, and public health professionals who know best how to identify, design, and build appropriate technologies. They are experts in community organizing and empowerment. Stable funding enables our partners to engage in long-term strategic planning, and to retain qualified staff who develop and maintain strong relationships with local communities and leaders.

**WHY OUR PROJECTS LAST**

We believe poor people are their own best resource in escaping poverty. We listen, involve community members in each step of the process, and fund solutions based on their priorities.

**CONVENIENT WATER SUPPLIES**

Easy access to clean water creates opportunity. With the constant burden of water-fetching and illness lifted, families can move beyond the demands of daily survival. Women have time for income-generating activities. Families begin to save money. Girls can go to school. Addressing the water and sanitation needs of the world’s poorest is the one activity that, when done properly, saves lives and generates benefits that can break the cycle of extreme poverty.

**TOILETS AND HAND WASHING**

Clean water alone is not enough. All Water1st projects integrate toilets, hygiene education, and piped water systems. Studies have consistently shown that together – water, toilets, and hygiene – stop the spread of disease and save lives. We have also seen that projects which provide multiple benefits, like increased time and labor savings, are more likely to be maintained over the long-term by our project participants.

**PROJECT FOLLOW-UP**

Applying a comprehensive program evaluation system is one of our central operating principles. We routinely visit our projects to evaluate our work, to hold our partners accountable, and to share and exchange knowledge. We make sure each project is providing the intended benefits and generating the best possible outcomes. You can be confident that your donation is wisely spent and is making a real difference in the lives of the people we serve.

**SINCE 2005**

<table>
<thead>
<tr>
<th>$16 million</th>
<th>2,178</th>
<th>178,000</th>
<th>5</th>
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</thead>
<tbody>
<tr>
<td>raised</td>
<td>water projects completed</td>
<td>people with clean water</td>
<td>countries</td>
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</tbody>
</table>
2016 FINANCIALS

$2,218,630 RAISED IN 2016

2016 REVENUE
- 75% Individuals
- 21% Foundations
- 3% Corporations
- 1% Other

2016 EXPENSES
- 87% Programs
- 11% Fundraising
- 2% Management

WE LEVERAGE YOUR INVESTMENT
For every $1 invested, local government and communities contribute an additional 74¢ in cash, local materials, and labor.
WHERE WE WORK

Every WaterFirst project includes piped water, toilets, hygiene education, community organizing, and management training.

2,178 PROJECTS COMPLETED
178,000 PEOPLE WITH WATER + TOILETS

BANGLADESH:
2,113 Projects completed
131,816 people served

ETHIOPIA:
6 large piped water systems completed
serving 21,084 people

HONDURAS:
24 Projects completed
39 Communities served
11,152 People with water + toilets

INDIA:
35 Projects completed,
serving 14,400 people

MOZAMBIQUE:
1 Piped water system
under construction,
serving 1,600 people
In an increasingly urbanizing world, perhaps Water1st’s most significant discovery has been Dushtha Shasthya Kendra (DSK)—our smart, compassionate, and highly-motivated partner in Bangladesh. DSK has pioneered an extremely effective means of providing water, toilets, and hygiene education in the urban slum environment.

We began funding DSK in two slums areas in Dhaka in 2006. Since then, they have demonstrated the ability to scale up and spread out. With increased Water1st funding, DSK now implements hundreds of projects a year in Bangladesh’s three largest cities of Dhaka, Chittagong, and Khulna.

One of DSK’s brilliant moves has been incorporating micro-lending into its operations. Water systems and toilets are not given away. Users must repay the full construction cost to DSK over 1-2 years. Repayment rates have exceeded 96%. These repaid loans are then used to fund more projects. Currently, 49% of our annual budget for Bangladesh comes from repaid loans.

![Image of a child washing their face]

**OUR WORK: BANGLADESH**

In 11 years, our partner in Bangladesh has completed over 2,113 water projects with Water1st funding. Each project serves a small group of slum residents. The high volume of project construction provides an ideal learning laboratory for water, toilet, and hygiene practices.

**OUR FINDINGS:**

Poor people will choose more expensive services if the system performs better.

Poor people will repay loans at a higher rate than homeowners in the USA.

Functionality and convenience drive toilet use, not cost or lack of education.

**HIGHLIGHTS:**

In 11 years, our partner in Bangladesh has completed over 2,113 water projects with Water1st funding. Each project serves a small group of slum residents. The high volume of project construction provides an ideal learning laboratory for water, toilet, and hygiene practices.

**CHALLENGES:**

Working in urban slums is complex—population density is incredibly high, space is at a premium. Slums imply challenging ownership patterns and issues, including the risk of eviction and redevelopment. This uncertainty translates into a reluctance to invest in infrastructure like water systems and toilets. When improvements are made, people often seek to minimize cost, which results in low-quality construction. In Chittagong, the challenges are magnified by a scarcity of usable water resources.

In spite of these challenges, DSK has developed a world-class program that provides high quality water and sanitation services to urban slum dwellers.

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**2005–2017 BANGLADESH PROGRAM:**

**HIGHLIGHTS:**

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**OUR COMPLETED PROJECTS**

<table>
<thead>
<tr>
<th>2,113 projects</th>
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<tr>
<td>131,816 people with clean water</td>
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**UNDER CONSTRUCTION**

<table>
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<tr>
<th>200 loan-based projects</th>
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<td>serving more than 20,000 people</td>
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OUR WORK: BANGLADESH
Every Water1st project includes piped water, toilets, hygiene education, community organizing, and management training.

2005–2017 BANGLADESH PROGRAM:

URBAN POVERTY: SLUM SETTLEMENTS
Water1st works in urban slums in Bangladesh’s three largest cities – the capital, Dhaka, population 15 million, Chittagong, population 4 million, and Khulna, population 1 million. Approximately one in four residents of these cities live in slum communities with no legal access to public water supply and sewer. Adding to the crisis is the rapid increase in urban slum populations in Bangladesh: 150,000 - 400,000 new residents arrive each year from rural areas seeking a better life for their families.

In these squatter settlements, the poor are forced to buy water of unknown quality at very expensive rates. In most poor neighborhoods, there are no sewer pipes and waste from ‘open’ toilets (meaning not connected to a sewer system) flow right through the community. This is why toilets are a high priority in our project areas.

COMMUNITY ORGANIZING
All construction work is preceded by well-organized efforts to help community members prioritize their needs. The process starts with a mapping exercise to identify local housing, shops, roads, mosques, and of course, water sources and any toilets or places for defecation. Communities vote on their highest priority issues and then create an action plan for solving them. It is common to see water supply listed as their first and most critical need, not surprising when slum communities report spending up to 40% of their annual income to treat water-related illnesses.

WATER SUPPLY: PROVIDING PIPED WATER TO POOR FAMILIES
Communities are offered a variety of water supply approaches, ranging from hand pumps to piped water networks. The goal is to encourage the adoption of piped water networks, which provide the best results at the lowest long-term cost.

In a piped network system, water is pumped to an elevated storage tank. Then, water is piped from the storage tank to one or more locations in the slum settlement, providing ample water to residents for drinking, cooking, laundry, and bathing.

THE “DSK TOILET”
Our local partner, DSK, builds outstanding toilets that are distinguishable from most other toilets built by NGOs around the world. They use a porcelain pan for easy cleaning, and a water seal makes them odorless. Water faucets are placed in the stall for flushing, cleaning, and hand washing. These are toilets anyone would use. DSK believes the design standard for poor people is exactly the same as the standard for everyone else.

WATER + TOILETS AT SCHOOLS, PUBLIC PLACES
Our projects also include water and toilets at schools, workplaces, and public markets. Our goal is to assure that people have access to clean water and toilets everywhere they go.

HYGIENE EDUCATION
A comprehensive hygiene-education program addresses the most challenging health issues within the community. Groups are segmented to reflect the main hygiene messages. Trainings are targeted to those who care for young children, to school kids, to adolescent girls entering puberty, and to specialty groups like food and tea vendors. These trainings result in dramatic changes in hygiene behavior and huge gains in health indicators.

REVOLVING LOANS
Users of the water systems and toilets are required to pay 100% of the construction costs via a long-term, low-interest loan. The loan approach insures that water systems and toilets are built for those who really want them and need them. It also increases our impact. With repayment rate exceeding 96%, we have nearly doubled the amount of work completed.

WATER IS THE CATALYST
Once neighborhoods have organized to solve their water and sanitation problems, they tackle other high priority issues, such as trash collection, roads, and drainage. Water committees have organized household garbage collection for a small monthly fee. Each day, a paid garbage crew collects waste and transports it to a government-approved dump site.
Water1st is proud to support COCEPRADIL, our outstanding local partner in Honduras, serving communities in Lempira, one of the poorest, most isolated regions of the country. COCEPRADIL is a cooperative composed of communities that have previously completed water and sanitation projects. The cooperative exists to assist communities with long-term system maintenance and to construct new systems for communities in need. The model is astonishingly effective. We believe the COCEPRADIL headquarters should be a learning center for development organizations around the world.

COCEPRADIL's projects provide the highest level of service possible. Each household receives a water connection and a water-seal toilet. The communities invest an enormous amount of labor to complete the project. The investment always pays off. Households flourish and hygiene conditions improve dramatically when an ample supply of water is piped directly to the home. In a world full of uncertain outcomes, this is a sure bet.

2005–2017 HONDURAS PROGRAM:

HIGHLIGHTS:

Receiving the first independent evidence-based evaluation from the Water for Life Rating System and scoring “Highly Recommended for Future Funding.”

Mandating that all new projects incorporate household water meters.

Establishing a loan program to help communities replace old infrastructure and add meters.

Adapting their program to serve larger rural town contexts.

Expanding into new municipalities in northern Lempira.

Collaboration with local government to provide backup support to community Water Committees.

CHALLENGES:

The greatest challenge in Honduras is the lack of international donor support. In the past decade, aid to Central America has decreased dramatically.

In Ethiopia and Bangladesh, Water1st is one of several donors supporting our local partners. Water1st's funding comprises about 1/3 of their water and sanitation program budgets.

In Honduras, Water1st provides 90-100% of COCEPRADIL's annual water and sanitation program budget. There are very few funding entities investing heavily in Honduras. Those that are providing aid have not consistently funded COCEPRADIL, one of Honduras' most effective water and sanitation organizations working in one of the poorest regions of the hemisphere.
THE DAILY WALK FOR WOMEN & GIRLS
In the remote region of Lempira, Honduras, a long dry season amplifies the effects of lack of access to water. Women and girls make multiple trips a day to local streams and water holes to collect water for all household uses – drinking, cooking, bathing, and laundry. The water they use causes frequent bouts of illness. Mothers are especially stressed. They must decide between leaving young children home alone while collecting water or taking them along which often entails carrying them in addition to the water.

Our local partner, COCEPRADIL, implements effective water supply, sanitation, hygiene, and watershed protection programs in rural Lempira.

WATER SYSTEMS: SPRING CAPPED, GRAVITY FLOW & PIPED TO EVERY HOUSEHOLD
Because of the mountainous geography of the Lempira region, water systems are gravity flow. Mountain springs are capped and fenced for protection. Water is then piped to a storage tank, where it can be chlorinated. Storage allows each household 24/7 water service. A pipe network transports water to individual household water taps and wash basins (pilas), providing ample supplies of safe water at the turn of a faucet. Each household receives a covered water dispenser for safe storage of drinking water.

TOILETS
Toilets are a critical element to the health equation. Each household builds a pour-flush toilet that is odorless and easy to clean.

100% COMMUNITY COVERAGE
Our projects serve the whole community: homes, schools, clinics, community centers all receive water connections and toilets. This cost-effective approach provides the greatest health and economic impacts on a community.

LABOR CONTRIBUTION/CONSTRUCTION
Before a project starts, at least 80% of community households must sign a project agreement, detailing their expected contributions. Project beneficiaries provide all labor required to complete the project. The labor investment is substantial and includes digging miles of pipeline trench by hand and carrying 500-pound pipe up steep hills. But they recognize the benefits of the project and work long, arduous hours to guarantee project success.

HYGIENE
Once construction of the water system is underway, community members begin participating in health-education activities to learn about ways in which their new water systems can be utilized to improve hygiene practices. Children are a critical part of the hygiene-promotion activities because they are the principal victims of the water crisis. COCEPRADIL makes hygiene education fun with songs, games, and skits, all demonstrating the importance of using a toilet and washing hands.

SUSTAINABILITY: TRAINING, WATER COMMITTEES & WATER BILLS
Our local partner, COCEPRADIL, provides technical and administrative training that prepares communities to independently own and operate their systems. A local Water Committee is trained to effectively manage the system in perpetuity. Once the project is completed, each household pays a monthly water bill of about $2, enough to cover system maintenance and repair. The water fee also allows communities to accumulate savings for future system expansion and replacement.

WATERSHED PROTECTION
Communities are educated about the symbiotic relationship between their water source and the surrounding watershed. They learn ways to restore and protect the watershed, including new agricultural practices that support the preservation of forest cover.
While being one of the world’s richest countries in terms of history, culture, and heritage, Ethiopia is one of the world’s poorest countries economically. In the United Nations Human Development Report, Ethiopia ranked 174th out of 188 countries in the Human Development Index. The lack of access to safe water and toilets places a heavy burden on children. Water-related illnesses are widespread, resulting in a child mortality rate in Ethiopia that is among the highest in the world.

The burden of water collection falls on women and girls who spend hours every day collecting water from distant sources. In addition, they are expected to cook, collect firewood, tend fields, and care for the sick, many of whom are suffering from water and sanitation-related diseases. Time spent collecting water is time that could be spent participating in income-generating opportunities or, in the case of girls, attending school. Neck and back injuries are common among the women of Oromia.

Since 2005, Water1st has been providing support to our Ethiopian partner organization, Water Action, to work with rural communities within the Oromia region, to implement water, sanitation, and health-education projects.

**2005-2017 ETHIOPIA PROGRAM:**

**GOVERNMENT CO-FINANCING PROJECTS WITH WATER1ST**
The local government water office has agreed to co-finance our projects. This is a positive development on many fronts. Not only does it allow us to stretch our donations further, it leaves communities feeling hopeful their government cares about them, and ensures that local government has a stake in the project’s long-term success.

**PROMOTING HOUSEHOLD WATER CONNECTIONS**
Based on years of field data, Water1st believes household water supply (piped water) and quality toilets have the greatest health and economic impacts on a community. We are encouraging our partner, Water Action, to pursue household connections and pour-flush toilets in the current Ethiopia project, similar to the models used successfully in Honduras and India. We anticipate this experiment will lead to a new standard for projects in Ethiopia.
OUR WORK: ETHIOPIA

Every Water1st project includes piped water, toilets, hygiene education, community organizing, and management training.

2005–2017 ETHIOPIA PROGRAM:

THE DAILY WALK FOR WATER
Water1st works in the rural Oromia region of Ethiopia, where approximately 90% of the people lack access to clean water, and only 7% have sanitary toilets. The burden of water collection is particularly high in Ethiopia. With no access to a safe water supply, women and girls collect water multiple times a day from distant sources and carry it home in heavy containers weighing 40 pounds.

Our Ethiopia partner, Water Action, is working with rural communities to implement comprehensive water, sanitation, hygiene, and watershed protection programs.

COMPREHENSIVE & INTEGRATED SYSTEMS
In order to have an impact on water supply, sanitation, health, natural resource protection, and the economy, our local partner develops a master plan for each watershed. Water1st is focused on implementing the plan for the Dawo Woreda, a county within the Oromia region. Projects are clustered geographically, resulting in compounded benefits. Communities can learn from one another, and a market emerges for supplies and spare parts.

WATER SUPPLY: CAPPED & PROTECTED SPRINGS, DRILLED WELLS, PIPED WATER
Projects use a capped and protected spring or a drilled well as the water source. Miles of pipe are needed to pump water to a storage tank and distribute it by gravity to public water points. The water points are strategically located throughout the community to keep collection time under 15 minutes for all community members.

A water tap attendant opens each water point for a couple hours in the morning and then again in the evening. Community members pay for the amount of water used, approximately 2 cents per 5 gallons. Water systems are metered to assure quality control related to tap attendant fee collection and the swift identification of system leaks.

THE INVESTMENT OF LABOR
Community members invest their labor in every stage of project construction. They are responsible for all unskilled labor, such as building access roads, excavating miles of pipeline trench by hand, carrying pipe, and building latrines.

ELECTED WATER COMMITTEES
Households participating in the project elect a water management committee, comprised of equal numbers of men and women. Each committee is responsible for the ongoing operation of the water system, including collecting water fees and managing trained technicians who perform regular maintenance.

LATRINES
Sanitation is an important part of the health equation. Individual households are trained to construct their own latrines. The project goal is for 80% of households to have latrines by the time the water project is operating. Latrine design uses locally available materials to make it simple to replace.

HYGIENE EDUCATION
Community members conduct peer-to-peer hygiene education to further improve public-health conditions. Community hygiene promoters are trained to educate households about health and sanitation and the importance of clean water and latrines. Hygiene messages include: using the well water for all domestic purposes, washing hands frequently, and digging solid waste disposal pits in every yard.
OUR WORK: MOZAMBIQUE

Every Water1st project includes piped water, toilets, hygiene education, community organizing, and management training.

NEW PARTNER AND COUNTRY PROGRAM

Water1st is fortunate to be in a position to extend our reach to Mozambique, where 80% of the population lacks access to water and toilets. Mozambique is one of the poorest countries in the world, ranking 180th out of 188 countries on the United Nations Human Development Index.

After rigorously vetting potential partner organizations over the past two years, we have chosen to invest in Grupo de Saneamento de Bilibiza (GSB). GSB is a smart, compassionate, motivated, and resourceful organization working to help rural communities in the Quissanga District in northern Mozambique. Partner selection is paramount to our success. Not all implementing groups are equal. In addition to technical skills, GSB has the desire and ability to organize and mobilize people. GSB is also genuinely curious to know the actual outcomes of their work. When something doesn’t meet their expectations, they make an adjustment. This commitment to constant program improvement is a key characteristic we look for in our partner evaluation process.

Our partnership will provide GSB with sufficient financial support to develop a holistic water and sanitation approach tailored to their environment. Our goal is to realize success during this preliminary partnership, leading to establishing full partner status with GSB.

THE RURAL QUISSANGA DISTRICT

Poor sanitation conditions, lack of toilets, open defecation, and lack of water sources has resulted in unhygienic environments, fueling the spread of water and sanitation-related diseases, and contributing to high child and maternal mortality rates. Less than 1% of the Quissanga district population has access to piped water and 77% do not have sanitary toilets or latrines. Water sources range from poorly-sealed shallow wells to ponds and rivers, with women and girls fetching water more than 8 kilometers from their homes.

Approximately 90% of the Quissanga population practice subsistence agriculture. Markets for agricultural products are limited, making it difficult for families to generate income. In response to this challenge, GSB has formed farmers’ co-ops to increase productivity and shift cultivation to more marketable products. Even with assistance from GSB, farmers are still earning less than $1000 per year.

PIPED WATER, TOILETS, HYGIENE EDUCATION

In 2017, GSB expects to reduce the transmission of waterborne infectious diseases through the provision of water, sanitation, and hygiene-education services to the rural town of 20 de Outubro, population 1600. This project will include piped water to households and the adoption of flush toilets, levels of service that are necessary to achieve the project’s goals. Alongside these interventions, GSB will embark on a public-health promotion campaign to encourage hygienic practices made possible by access to clean water and toilets.

MOZAMBIQUE PROGRAM:

Population: 25,830,000
Population living below $1.25 a day: 61%
Life expectancy: 55 years
Death rate, under 5: 87 per 1000
Our Local Partner:
Grupo de Saneamento de Bilibiza

UNDER CONSTRUCTION

1 project serving more than 1600 people
India is a country experiencing incredible economic growth, which is driving the emergence of a large middle class. In spite of this encouraging trend, India is still home to a vast population of extremely poor people. Layering the demographic of age distribution over income distribution, one finds that many of India’s young people live in very challenging living environments. Subsequently, over 2 million Indian children under the age of five die each year, with water-related illnesses being one of the leading causes of death. Access to clean water, toilets, and hygiene education in India would result in a major shift in child health statistics worldwide.

The Sundarban region of West Bengal is one of the most impoverished regions of the entire Indian sub-continent. The majority of people live below the poverty line as rice farmers and subsistence fisherman. Villagers collect water from unprotected ponds, canals, and marshes. Consequently, many children in the region suffer from chronic diarrheal illnesses, permanently stunting their mental and physical development.

**2005–2010 INDIA PROGRAM:**

**RURAL POVERTY: THE SUNDARBANS, WEST BENGAL**

With no access to a safe water supply, women and girls in the Sundarban region collect water multiple times a day from ponds, canals, and marshes as the shallow wells are too saline for drinking. And without access to toilets, people suffer from chronic water and sanitation-related illnesses. From 2006-2010, Water1st provided grants to our Indian partner organization, Akashyanagar Pallisri Sangha (APS), to work with rural communities to implement water, sanitation, and health-education projects.

**WATER SUPPLY: DRILLED WELLS AND HAND PUMPS**

Projects consist of drilling deep wells, up to 1,000 feet, and installing locally-manufactured Mark II hand pumps. Individual households construct a pour-flush pit toilet to eliminate the spread of disease. Households participate in a hygiene-education program to learn the health benefits of hygiene practices such as hand washing.

**GOOD TOILETS MATTER**

One of APS’s strengths is their commitment to quality toilets. APS believes that every family should have access to a real toilet, not a latrine. To help the poorest families achieve this level of service, they require a household to cover just 40% of the cost of building the toilet. The household can repay the 40% loan over a four-year period. The toilets built by APS are odorless and easy to clean, just like the toilets we use. With latrines, one frequently sees 50% abandonment within one or two years. Nobody likes to have a stinky latrine around. With the APS toilets, monitoring shows on-going use at 100%, combating the notion that it is difficult to achieve behavior change when it comes to sanitation habits. Our observations suggest that behavior change is quite simple if the toilet that is built is a good and desirable one.

**REVOLVING LOAN FUND**

Households repay 40% of the construction cost of the well and their household toilet in the form of a microloan. Micro-lending for water projects is rare in rural areas with limited cash economies. The upfront loans serve as an indicator of the community’s level of commitment to the project and the likelihood they will succeed in maintaining their system over the long run. APS has demonstrated that loan-based support can be very effective, even in a rural context.

**CURRENT PROGRAM STATUS + WATER1ST FOLLOW-UP**

In 2011, Water1st made the decision to suspend active funding for the construction of new projects through our India partner, APS. This decision was based primarily on our conclusion that the program was at capacity and was not likely to evolve further through our participation. We had hoped for improvements in the community organizing elements of APS, including the training of plumbers and the consistent collection of monthly water fees. Setting up a community to independently own and operate their system is the cornerstone of the Water1st process, and these goals were not being met. After a couple years of intentional efforts to improve community-related elements, we still did not observe APS making significant changes during our field visits. Based on the lack of observable results, we concluded that our partner did not have the desire or expertise to make adjustments to their programs.

Our loan program continues and new water points and toilets are being constructed using revolving loan funds that we initiated. We continue the ongoing monitoring of existing projects as we evaluate our options for future funding. In the meantime, resources that went to our India partner have been redirected to other programs, allowing other partners to increase their rate and volume of project implementation.
OUR VISION
A world free of extreme poverty where everyone has access to a clean, permanent water supply and a toilet.

OUR MISSION
To enable the world’s poorest people to implement and sustain community-managed projects integrating clean water supply, toilets, and hygiene education. Water1st unites people to fight the global water and sanitation crisis. We believe this worldwide, silent catastrophe will be solved when people come together as a concerned community and take effective, simple actions.

Every Water1st project includes clean, piped water, toilets, hygiene education, community organizing, and management training.

Every $75 raised provides 1 person with clean water + a toilet FOR LIFE.

OUR GUIDING BELIEFS
1. Access to clean water and a toilet is a basic human right.

2. Clean water transforms lives. Our projects are designed to END the walk for water for women and girls. Access to clean, convenient water promotes health, education, time savings, productivity, equity, dignity, life.

3. Invest in people. Every poor community is rich in the most valuable human resources - intelligence and strength of spirit. Our projects thrive because we train community members to independently own and operate their water systems, and we place women in key leadership roles.

4. Offer solutions that last. Every project we have supported is still in operation today. This 100% success rate stands because we prepare communities to manage their own water and sanitation systems in perpetuity.

5. There is no one-size-fits-all response. Our in-country partners and colleagues are highly qualified to provide solutions that are suited to the unique conditions of each project community. Our long-term commitment and consistent support of our partners has enabled each country program to increase capacity and operate more effectively each year.

6. Don’t cut corners. We support high-quality water systems that are designed to last a lifetime. We spend money on pipes so that water is conveniently located, allowing users to increase the amount of water they use for personal hygiene.

7. Follow up. We visit our in-country colleagues and projects regularly because we understand the value of monitoring and evaluation. Rigorous oversight ensures that each project is providing the intended benefits and allows us to improve the planning and execution of future projects. We hold our local partners accountable, affirm them in their work, and share and exchange knowledge. This is how we guarantee our donors are making a wise investment.

8. We are stronger together. We believe the global water crisis will be solved when we build a community of concerned people, and together, support simple and effective actions.
While space does not allow us to acknowledge all of our donors, every gift is valued. Your support has a lasting impact on thousands of lives and sends a message of hope to the people we serve.