

Africa Rural Sanitation Sharing and Learning Workshop AfricaSan 5 Conference – Cape Town, South Africa



Introduction:

On Sunday 17th of February the Community-Led Total Sanitation (CLTS) Knowledge Hub hosted an Africa Rural Sanitation Sharing and Learning Workshop prior to the start of the AfricaSan 5 Conference in Cape Town, South Africa. Over seventy practitioners, coming from SNV, UNICEF, WaterAid, the Water Supply and Sanitation Collaborative Council (WSSCC) and different government levels attended the workshop with the aim of sharing experiences, challenges and ways forward in regards to financial commitments, equity and inclusion and context-specific programming in Africa's rural sanitation and hygiene. The coming sections present main takeaways from the workshop and future priorities as identified by the participants.

Political Will for Financial Commitments:

There is a compelling need to think further about how to mobilise resources to achieve rural sanitation and hygiene Ngor commitments. This section presents some of the experiences shared by the participants in regards to strengthening government will in order to finance rural sanitation and hygiene programming to reach sanitation and hygiene targets.

- **Angola: Planning, Budgeting and Implementing through the Local Government.** In Angola several municipalities did not know how to plan a budget to present to the central government to increase the resource allocations to sanitation and hygiene. Furthermore, many of them were not aware of when the national government planned its annual budget to advocate at that time to the government to increase the funding. UNICEF ran a project to strengthen the planning and budgeting for sanitation and hygiene. First, the focus was on the best performing municipalities in regards to CLTS, then the best leaders were chosen

and trained on how to make a budget plan. In 2018 the national budget allocated to sanitation and hygiene was 10 million Angolan Kwanza and increased to 30 million in 2019. Moreover, the programme implementation efficacy has improved from 20% to 40%.

- **Benin: Advocacy and Institutional Triggering.** The rural communities from Benin had the skills and experience to implement sanitation and hygiene projects but there were not enough resources at the commune level; and as a consequence there was a lack of operation due to the limited resources. GIZ supported communities to take the lead, to advocate to the government for a specific budget line and to look for funding to allocate their own resources to sanitation and hygiene. Institutional triggering of district representatives was also carried out. Nowadays, communities are sharing their lessons learned on institutional triggering and have the aim to disseminate them beyond the national government level.
- **Kenya: Evidence-based Advocacy Using Local Level Data.** The Kenyan national ODF campaign was delaying the date to reach ODF, as well as postponing sanitation and hygiene priorities, commitments and the mobilisation of resources. Furthermore, there were not active CSOs advocating for the same sanitation issues that could engage government leaders. SNV developed a case-controlled study about children diarrhoea and looked for data that could convince politicians at the local level to increase the county budget allocated to sanitation and hygiene. Despite the fact that there was not a sanitation budget line in Kenya, there were resources available at the county level. SNV developed advocacy products and found community leaders to advocate for budget allocations to the sector. From an SNV perspective, local data that can speak to people directly, can bring results in a cost-effective manner. Documents about this sanitation study are available at: www.snv.org/update/understanding-effects-poor-sanitation-public-health-environment-and-well-being-kenya
- **Nigeria: Lessons Learned from Field Trips to India.** Last October Nigerian representatives from government, donors and the private sector visited five Indian states to learn from the Indian sanitation and hygiene campaign and to share experiences between the countries. The WSSCC Nigeria National Coordinator highlighted the political will and financial commitment from the Indian Prime Minister Narendra Modi. Political will and resources first came from the government itself. The mission has been to achieve ODF status in every Indian state, so every year there has been funding for sanitation no matter the political affiliation of the states. It has been not only about sanitation and building toilets but about livelihoods; there has been also funding for women and the poorest of the poor. There has been a structure on how to achieve this aim; a baseline assessment indicated who had toilets and who did not, and there have also been regular updates to a governmental sanitation database to monitor progress.

- **Tanzania: Involvement of High Level Politicians.** The national Parliament budget allocated to sanitation and hygiene was limited in Tanzania. Training for female members of Parliament was delivered to build capacity and raise awareness on sanitation and hygiene. Furthermore, a fundraising strategy was developed: a car washing event and a dinner gala, where Parliament members washed cars, performed, danced and sang, raised over 1 billion Tanzanian shillings to sanitation and hygiene. This lesson draws attention to the fact that if the Parliament takes up the sanitation and hygiene campaign, a country can be fully aware and move further to achieve its sanitation and hygiene targets.

Equity and Inclusion in Rural Sanitation Programming:

One billion people live with some form of disability and two hundred million people live in the poorest and most marginalised conditions according to data from the World Health Organization. Achieving SDG 6 requires focusing on the excluded groups first in order to reach everyone, everywhere, at any time. Are we promoting inclusiveness through our sanitation and hygiene programming? And are we doing this through safe approaches and frameworks? This section presents some of the key experiences and thoughts shared amongst the participants in regards to making sanitation and hygiene programming accessible, equitable and inclusive to make sanitation and hygiene progress sustainable.

As highlighted by Elizabeth Wamera, Senior Technical Expert from WSSCC, there are still many issues regarding leaving no one behind that we have to know better about. In the first place, what do we mean by inclusion and exclusion? What is happening in our programming? What is the government doing? How do we best finance? How much is being documented? Are we sharing and learning from each other?

Local Identification + Local Solutions:

It is required to review the criteria for identifying the poorest and marginalised as sanitation and hygiene indicators are not being taken into account in government registers of the most vulnerable households. Furthermore, political and financial interests often influence the official definitions. The right targeting of vulnerable groups and standardised government registers are necessary to have national statistical data that is accurate and reliable for designing sanitation and hygiene programming that focuses on the right audience.

Furthermore, government registers are a good starting point, and also needed in order for people to access government funds and subsidies, but they need to be linked with community perspectives on who are the poorest and most vulnerable to make sure they match up.

In Angola, Togo and Zimbabwe, before triggering, people with special needs and elders are identified and targeted by the community. In these countries, local advocacy for the community to identify these groups has been increasing over time. Stronger partnerships and coordination is still needed together with social accountability networks that can monitor the progress on the most vulnerable groups. Moreover, communal solidarity is an ongoing fact in Benin where the community

itself, while doing the triggering, discusses how they can support people with special needs and elders. Women groups target households and also women artisans with knowledge of using clay to make fire stoves make toilet designs that adapt to the needs of the elderly.

Improving Research, Targeting and Monitoring:

Government registers of the most vulnerable households need to be regularly updated to ensure the right people are being targeted. In addition, more analysis on the qualitative side and collection of data about behaviour change and handwashing is needed as the focus is still much more related to sanitation technologies. We have been looking at the access numbers but the understanding about the barriers that stop people from accessing sanitation and hygiene facilities is still limited.

We also need to better identify, target and monitor the progress on working with groups that have been left behind. This is possible by generating partnerships and alliances, and by engaging the community in social accountability networks through local advocacy and adaptive programming.

Political Will and Commitment through Better Advocacy:

How can we work on influencing policies that are responsive about leaving no one behind? Policy has to lead to action, we need to operationalise the policy side. We also have to push for better verification and assurance, and better systematization of that policy assurance.

Additionally, if we want to influence we have to look at the peer systems and support sector coordination and cooperation amongst the different government levels and stakeholders involved. Furthermore, we need to consider government as a partner who is also looking to move forward. We have to learn how to engage with government and do things differently; the use of evidence is pertinent as is communicating it in the right way to generate timely and effective political advocacy.

Context-specific Rural Sanitation Programming:

UNICEF and WaterAid Joint Guidance on Programming for Rural Sanitation:

Development organisations in the sanitation and hygiene sector tend to design sanitation and hygiene programming that do not take into account the specificities of the context, fit the SDGs targets or pay attention to equity and sustainability while scaling-up.

For this reason, UNICEF and WaterAid are developing a joint water, sanitation and hygiene (WASH) guidance for the planning, implementation and monitoring of context-specific rural WASH programming. It is titled ***Guidance on Programming for Rural Sanitation***. These guidelines was designed with the aim of achieving scale, equity and sustainability through strengthening partnerships, area-wide thinking, context-based and flexible programming. It defines approaches that work at the different contexts (community-based, non-market support, low-cost support, rural on road approaches, among others). And as part of the guidelines, UNICEF and WaterAid are

working on the development of a costing framework that supports the design of rural WASH programmes.

Furthermore, the guidelines presents two key areas of engagement: at the [national level](#) (including the development of the following actions: national level analysis, clear situational analysis, clear assessment of the enabling environment, implementation capacity and programme evaluation) and at [area-wide levels](#) (with four main categories: rural remote, rural on road (closer to urban), rural mixed (within urban communities or very close to them) and difficult contexts).

[Area-wide, Joint and Context-specific Programming in the African Region:](#)

In Nigeria, a multi-stakeholders group is taking place at the national level to discuss how it is better for stakeholders to come together towards the same sanitation goals. In Ethiopia, the One WASH programme has brought development partners and government together through the development of a sector-wide approach that targets a one WASH plan, budget and report.

Furthermore, Cameroon developed a national strategy for CLTS so everyone involved in the implementation of the approach shares the same standards. The national strategy was designed as a guideline for implementation and advocacy.

Summary

Enablers and Barriers:

- Water, sanitation and hygiene need a cross-cutting approach. Different ministries receive funding for sanitation but they do not know how much of the national budget will be allocated until it comes into place. This does not contribute to ministries making accurate financing plans and sharing resources for sanitation and hygiene.
- Some African countries already have budgets in place for sanitation and hygiene but resources are not active. Governments should have regular training on costing and finance.
- We need to document better as evidence usually is not presented in an appropriate manner and resources tend to be allocated to other sectors.
- National monitoring systems should be localised at the level they have to analyse. We need to support the capacity of the national and local government levels not only to collect but to report on data and to generate new programming with that evidence.
- If we can generate better coordination and partnerships in the sanitation space, we will make progress that benefits rural areas faster. The challenge tends to come from the institutions that support the organisations working on the ground, as the approaches applied usually generate confusion amongst the implementers. Better coordination calls for a better understanding between the actors working on the same ground.
- One way to solve the knowledge gaps related to multi-sector programming is by strengthening horizontal learning about common components and doing field exchanges at the district, communal and regional levels. Also, running annual meetings and national

events and benchmarking processes can contribute to looking at the performance of the different districts and gain leadership and involvement at the higher government levels.

Reflections:

- Identify the specificities of the context. Practitioners are usually more focused on the implementation side and do not do any type of segmentation of the areas where they are working.
- The engagement of the local authority is highly important as they are closer to local communities.
- Livelihood aspects need to be considered in all sanitation and hygiene programming, to create a more holistic approach in which preferences and needs are really taken into account.
- Consider different behaviours when thinking about context-based sanitation programming, especially regarding people in the periphery.
- Have evidence to allocate partners to different locations, and link up approaches by looking at other sectors such as health and nutrition. The level at which sanitation programming is implemented should be based on the available data.
- Build capacity first.
- While documenting is important to show failures and the learning generated through them.
- Bear in mind the four principles from the UNICEF-WaterAid Joint Guidance on Programming for Rural Sanitation: partnerships, area-wide, context-based and evidence. Be flexible and adaptive, share and learn from data.

Future Priorities and Feeding into the AfricaSan5 Conference:

The following statements were produced by the participants with the aim of feeding the AfricaSan5 Conference deliverables with some of the workshop's key learning:

[Resource Mobilisation]: "Commitments should be home-made and local governments and implementing agencies suitably capacitated to achieve and hold accountable via a results based funding mechanism."

[Equity and Inclusion]: "We recognise that there has been progressive realisation of the implementation of the Ngor declaration No.1 on inequalities. Governments need to strengthen their capacities to identify, disaggregate data on inequalities, prioritise and strengthen the interventions to address the inequalities in partnership with relevant stakeholders."

[Context-specific Programming]: "We, development partners, are committed to strengthening national and local governments and other development actors' capacity to capture lessons learned towards adaptive programming, and optimising resources for sustainable sanitation and hygiene, especially for the most marginalised populations."

Final Thoughts:

- We need leaders who are passionate and committed; and able government officials who keep on track and are accountable.
- We also need sanitation campaigns with different dimensions that carry out local and community innovations. Fostering creativity is very important; countries need people who are outstanding and can share rural sanitation and hygiene innovations out in their countries.
- Institutional triggering is a priority. Especially to secure budget funds for sanitation.
- Budget allocations and spending need to be regularly monitored.
- Identification of those with disabilities and others with special needs should happen before triggering in CLTS. Communities should be challenged early on to find their own solutions for such people.
- Donors and others need to recognise that leaving no one behind will often need extra resources.
- Coordination and cooperation have their own costs. We have to pay attention to make cost-effective rural sanitation and hygiene programming.
- To a great extent the discussions carried out during the workshop were about decentralising and differentiating in sanitation and hygiene policy and programming, and about doing things differently.