

Monitoring Sustainable WASH service Delivery Symposium

Report for CLTS Knowledge Hub (IDS)

Prepared by: Jolly Ann Maulit

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Background

Over 400 people from 58 countries gathered together in Addis Ababa to begin 3 days of discussions and learning on sustainable WASH M&E. The symposium was hosted by IRC (with support from the Government of Ethiopia, AMCOW, and various organizations) and includes WASH practitioners from government, NGOs, international organizations, and academics, among other participants. There was a large representation from African countries, with other guests stemming from Asia, North America, Australia, Europe and Latin America. The vision of the symposium in short is to drive towards "strong national sector monitoring systems that allow for planning and sustaining WASH services". The key words to take note of in this vision are: national, sustaining, and services ; there's a strong push towards aiming for government-led monitoring systems and for continuous monitoring over time, not only of infrastructure but of the various components of WASH service delivery (e.g. the financing, the cost effectiveness, the behaviour changes).



Figure 1: Panelists discussing post-2015 M&E

Symposium Set-up



Figure 2: Traditional Ethiopian Music at the Symposium Dinner

Due to the vast amount of topics around WASH M&E to be discussed, the symposium was divided into 6 main streams: 1) Monitoring the Financing Need for Service Delivery, 2) Country-led and Country-wide monitoring of rural and small towns water supplies, 3) Project Monitoring: A vicious cycle of donor accountability or a necessary stepping stone to better national WASH sector monitoring, 4) ICT for monitoring sustainable service delivery, 5) Monitoring for Sanitation and Hygiene, and 6) Building Coherence in Global-Regional- National WASH monitoring.

Summary of Sessions Attended

Most of the sessions attended were those related to sanitation and hygiene.

Session 1 - Setting the Scene for Sanitation and Hygiene Monitoring

Two presentations were made during this session: WSP on Monitoring the Enabling Environment and Plan International on their CLTS Pan African Program.

The Total Sanitation and Sanitation Marketing program supported by WSP in 3 countries was interesting because one of their arguments is that for M&E to be sustainable, it needs to be supported by other factors in the enabling environment. Among measuring other programmatic indicators, they measured the changes in the enabling environment and its effects on latrine access.

The components they considered as part of the enabling environment are: policies, strategy and direction, institutional arrangements, clear program methodology, implementation capacity, availability of sanitation products and tools, financing, cost effective implementation, and M&E. In one of the areas where this program was implemented, many components in the enabling environment changed from low to high throughout the program implementation and in return, the access to latrines (as measured by national statistics data) increased from about 1% to 4% per year. This shows that with a strong enabling environment, it is possible to increase the rate of access to latrines per year and in turn achieve targets such as the MDGs or universal access in a shorter timeframe. This is really quite interesting and makes a strong case for working on the enabling environment to improve how we deliver sanitation services.

The Plan Pan African program gave an overview of their work in multiple countries and the difficulties of aggregating information between various CLTS programs and some lessons learnt. Although they are making progress with the program, it is difficult to compare between countries with different contexts, but that is something that should be considered in future program design.

Session 2 - Monitoring ODF sustainability

The session on monitoring ODF sustainability was filled with a lot of interesting information. UNICEF presented on the idea of ODF Protocols, while Plan Malawi and Plan Uganda presented their monitoring strategies, and EWB Canada presented their work on monitoring using the Block System.

ODF Protocols are now commonly found in many Sub-Saharan Africa countries. A protocol is any sort of guideline, strategy or commonly agreed upon mode of operation for reaching ODF status. Those countries which have these protocols appear to do better in accelerating their CLTS implementation and increasing the number of people living in ODF communities. Protocols can include ODF definitions for the country, a standardized verification procedure, and other commonly agreed upon methodologies. It seems that ODF protocols provide the direction and guidance needed for countries to know where they're headed with regards to ODF and how to get there.

Plan Malawi and Plan Uganda presented on their use of Natural Leaders and other community volunteers to monitor ODF. They use Plan staff along with extension workers to trigger villages, and then choose people from communities to conduct the follow-ups (with Plan staff occasionally checking in). The challenge with this approach to monitoring is that these Natural Leaders and volunteers often become de-motivated after the NGO support leaves, leaving the community unsupported. This puts the community at risk of reverting back to OD. It seems that the governments are not able to support this model for monitoring without Plan, which makes it difficult not only to sustain the changes but also to scale up to other communities.

EWB Canada presented on the Block System approach to monitoring which uses groupings of health extension staff to conduct CLTS activities. It's a method which allows for extension staff to plan as a group for their activities, CLTS included among other duties. It appears to be more effective since most CLTS activities are conducted in groups. Further, the planning and group work system allows for a record which shows the CLTS activities that should be done for the month, so supervisors can hold extension staff accountable to conducting them and CLTS does not fall by the wayside.



Figure 3: Countries with an ODF Protocol

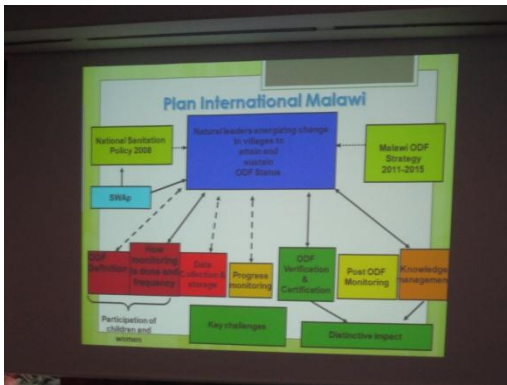


Figure 4: Plan Malawi CLTS Set-up

In the discussions following the presentations, ODF sustainability was mentioned time and time again. There appeared to be an overall concern over how to make ODF sustainable, especially for NGO driven programs. Some points were raised on the introduction of sanitation marketing while others mentioned the integration of CLTS activities into government staff work, but no conclusive answers or even understanding on the issues were reached. That being said, the time given for each session was quite short and thus it was understandably difficult to dig deeper into these issues.

This is however a huge challenge and will therefore warrant further discussion.

Session 3 - Financial monitoring of Cost Effectiveness of Sanitation and Hygiene interventions

There was a joint session for financing and hygiene led by those who worked on the WASHCost initiative through IRC. The session focused on costing hygiene but also looked at sanitation and water costs. The costing analysis is meant to advocate for and substantiate continued investment in sanitation and hygiene, strengthen the knowledge available on different kinds of interventions, and help with quality assurance. There was also an attempt to assess the cost effectiveness of hygiene interventions, through which tools were developed to measure hygiene effectiveness. The analysis took into consideration various stages of WASH services and different types of costs (financial and economic costs for example). The first step was to gather data on key behaviours before the interventions, then assess hygiene behaviours before and after to see if any changes occurred (based on behaviours, not health impacts).

Three case studies were presented where the WASHCost analysis was trialed; the countries where the case studies took place were Burkina Faso, Ghana and Mozambique. In Burkina Faso, one of the findings was that more money spent on something doesn't necessarily lead to better results. However, the data on household expenditure on soap was limited and they did not factor in direct support costs, which are often higher for software promotion as hygiene behavior change necessitates reminders and reinforcement. In Ghana they were able to assess the service levels before and just a few months after the interventions. The cost per person to increase service levels by 1% is \$4, while for hand washing with soap (HWWS) it is \$10, and for water supply it is \$3. These findings show that HWWS is the least cost-effective WASH intervention, though this is still in the short term and things may change in the long run. For Mozambique, it was not possible to get information on the allocation of finances to various interventions, only lump sum figures were available. Although they found that it costs 5 USD per person per year to have a basic level of service for sanitation (basic latrine), these figures may not be reliable (as often water supply infrastructure costs more than sanitation interventions).

All in all, although there were many questions about how the data was collected, which indicators were used to measure effectiveness, and which costs were considered, the tool is promising as it can help advocate for sanitation investment. It is worrying though that hygiene promotion was seen in at least one of the case studies to cost the most, while other literature in the past have deemed it one of the most cost-effective interventions for health. It appears that additional work needs to be done to clarify these divergent claims.

Session 4 - Monitoring behaviour change outcomes for all

The fourth session at the symposium discussed monitoring behavior change in order to have universal access.

Archana Patkar from WSSCC stated in the first presentation that we cannot truly gain universal access to water, sanitation and hygiene unless we consider those who are left out or cannot use or access services continuously over time. As we are learning from the Millennium Development Goals (MDGs) experience, not including equity in the indicators we measure has resulted in reinforcing the inequalities which exist. If we are to sustain behaviour changes at scale, it is most important to reach those who are commonly excluded.

Some key questions to consider when monitoring equity in WASH programs are:

1. Who is left out and why?
2. Who does not use the service, when and why?
3. Who cannot practice the behaviour, when and why?
4. Who cleans and maintains the facilities or services, at what cost and for whom?
5. Who is unable to maintain, rebuild, upgrade and invest in services and why?
6. Who benefits and who does not?

To truly assess whether progress is being made in WASH services, it will be important to ask these questions and gauge success through the services provided to those at the bottom of the pyramid. The WASH sector must strive to decrease inequalities through our efforts and measure progress against these indicators in order to reach universal access.

Two other presentations were conducted in this session from BRAC and WSP India. BRAC presented on their methods for participatory performance monitoring for WASH services at scale using village committees. WSP presented on their mobile monitoring system for rural sanitation. The aim of the WSP tool was to have indicators at scale in a timely, cost effective manner which can be updated regularly in order to provide feedback for course correction. Their analysis shows that the mobile monitoring system has more benefits than paper and can even touch on the issues of equity. It is hoped that this system can help to verify and add realism to some of the data collected by the Government of India.

Session 5 – Sanitation and Hygiene Toolkits

Various toolkits were presented for monitoring sanitation and hygiene, to assess WASH technologies, and for water quality testing.

Water for People presented briefly on the work they are doing to monitor their “Sanitation as a Business” program. The monitoring takes place on three levels: household, key actors (service providers or finance institutions), and the big picture (the sanitation ecosystem). They collect household information through surveys and observations, and then rank each household based on their access levels. For businesses or service providers, they are monitored on their outputs, revenues, investments, and other key business indicators. For big picture monitoring, the overall aspect they monitor is how well different market functions are being carried out and sustained (parameters they measure include motivations and incentives, capacity of various actors, roles and responsibilities, demand creation and market entry). In the future, they hope to monitor consumer satisfaction, market penetration of supported businesses, return on investment, and cost-benefit. The overall conclusion from their monitoring experience is that monitoring the ecosystem is

complex, it is difficult replicate results, difficult to sustain, and there is plausible attribution of results to their intervention.

WASHTech presented on the use of the Technology Adaptability Framework (TAF). It can be used to assess how well people will respond to a given technology. The parameters which are measured include economic and financial, social, environmental, institutional and policy, knowledge and capacity, and technology performance. This tool was applied to evaluate the Urine Dry Diverting Toilet (UDDT) in Burkina Faso. It was learnt that although the TAF is useful, it is costly to conduct the assessment and requires time. In the discussion which followed the presentation, a participant mentioned that the TAF looked like a top-down, technology driven approach, to which the presenter responded that TAF is about sustainable services and not technology driven (though technology is the entry point). The TAF is being tested in 3 countries with 17 existing technologies to further validate the tool.

The last tool presented is the WHO & UNICEF Toolkit for Monitoring and Evaluating Household Water Treatment and Safe Storage (HWTS). The toolkit is useful to see the various proven methods for HWTS, to help with designing and coordinating HWTS M&E efforts, to choose and use 20 harmonized indicators, and for practical case studies. There are also annexes with practical examples of HWTS surveys, HWTS field test options, and other useful tools for practitioners.

Session 6 - Monitoring Hand Washing behaviour change

The measuring hand washing behaviour change outlined clearly the difficulties of measuring behaviours as opposed to infrastructure, and offered promising examples of ways to measure change in a cost effective manner. Direct observation (structured) was thought to be the best way to measure behaviours, however it does require time, good training, and a significant amount of funds (depending on the size of the study). Self-reported rates, though most often used by practitioners, provide the weakest set of indicators for actual hand washing practice. Proxy indicators such as the presence of hand washing facilities and water and soap at the hand washing facility, were found to be better measures of hand washing practice. These indicators are cost effective and relatively easy to measure through rapid assessments. Another additional benefit of using proxy indicators is that they are already measured through large national surveys such as the Demographic Health Survey (DHS) and the Multiple Indicator Cluster Survey (MICS). These provide large data sets which allow us to infer behaviour change from the proxy indicator of the presence of a hand washing facility and soap and water. It also allows for comparisons of those with hand washing facilities against key socioeconomic indicators, such as income and education level (the latest DHS data from multiple countries show a correlation between the presence of a hand washing facility in the home and higher levels of income and education). Therefore, though the use of proxy indicators and large surveys such as the DHS and the MICS, we can have a better understanding of hand washing practice on the ground and potentially what influences these practices in order to improve our programming. These indicators are promising in that although hand washing is an inherently difficult thing to measure, we are learning more and more about better ways to do this.

Extra-Session: Monitoring WASH in Extra-Household Settings

The session on extra-household settings focused on sanitation and hygiene issues beyond the household. Ryan Cronk from the Water Institute presented that the main areas of interest beyond the household are: high use areas, high risk areas, and special events. Settings which lend themselves to this definition are schools, markets, health facilities, refugee camps, settings with internally displaced people, prisons, and mass gatherings. Various monitoring systems are already available which include information on extra household settings. These are: national sector

information, nationally representative facility surveys, nationally representative household surveys, regional and global data and aggregation reports, and other emerging reports. However, despite the large amount of information available in these surveys, it appears that WASH is not a focus area for many of them. It would thus make sense to link with these already available monitoring systems to include WASH indicators for extra household settings.

Archana Patkar from the WSSCC followed the Water Institute presentation with a presentation on the importance of promoting sanitation and hygiene in extra household settings. She argues that institutional settings are a great entry point for social justice as it is much more difficult to promote and enforce behaviour changes at the household level. Extra household settings provide a unique opportunity to scale up regulations and standards for sanitation and hygiene, and to promote equity and the Human Rights to WASH; in short, it's a natural canvas to implement post-2015 aspirations for the WASH sector. She provided a great example in India where, at a large religious meeting, every roti was stamped with "Wash hands before you eat"; one can imagine the number of people reached with this message. This shows the potential to disseminate messages and facilitate behavior change through extra household settings as an entry point. In the long term, extra household settings provide opportunities to recognize the realities of behaviour change and practice, have duty bearers with clearly defined and measurable targets for sanitation and hygiene, create institutionalized standards that will enhance and educate demands, and provide an overall impetus for changing social norms. Improving standards in extra household settings in particular can ensure that people get used to and start demanding better facilities. In all, focusing on extra household settings may provide greater opportunities for sustained behaviour change in the future.

After this presentation, participants pointed out that in as much as we should focus on extra household settings, this should not discount the focus on promoting changes at the community level. Communities are still a viable entry point especially for those who may not be seen or may not have access to institutions such as schools (e.g. people with disabilities who may not be able to attend school). In order to ensure equitable access, WASH initiatives must focus on both institutions and communities.

Another presentation was on a study currently being conducted by Lenka Benova from the London School of Hygiene and Tropical Medicine. She's conducting research with the SHARE consortium to investigate the links between WASH in health centres and maternal health. Her presentation was on the current findings in Tanzania. Gathering all the information available, it appears that about 30.5% of births in total were in a WASH safe environment. Births in health centres had better WASH conditions than those at home, but no data was available on how the water and sanitation facilities were used or the hygiene behaviours practiced during the births (it was simply the availability of WASH facilities). Although more work needs to be done to narrow in on the specific effects of WASH on maternal health, these initial findings provide a good foundation for advocating for more research and potentially, for more focus on WASH in health facilities.

Key Take-Aways for CLTS

The key learning and reflections from the symposium can be applied to CLTS are outlined below.

- For CLTS interventions to be effective, it will need a supportive enabling environment. It's important that those who want to enter with CLTS or have challenges with their current implementation assess the enabling environment and take actions to make it favorable for success.
- If the enabling environment is so important for CLTS success, how do we best measure this? What are strategies which can be undertaken to improve the enabling environment?

- Definitions of ODF and even methodologies for how CLTS is implemented vary between countries and between various implementers. How important is it to have a commonly held understanding of ODF? How much these indicator definitions should be set by international bodies (e.g. JMP, UNICEF, etc.) for ease of aggregate reporting, and how much should be driven by the countries themselves to decide what the appropriate definitions are for their specific context? Does it matter that when we say ODF, we may not all mean the same thing?
- We need to collect best practices if available on how to monitor ODF and ODF sustainability.
- ODF sustainability and post-ODF are common concerns for implementers; it may be useful to convene a workshop to flush out these issues and propose tangible solutions.
- We need to consider our programming and program design and take into account the ability of the government or other sustainable system which can sustain the behavior changes brought on by CLTS through NGO driven programs.
- Has CLTS cost-effectiveness been measure in the past? How do we measure the effectiveness of our efforts?
- How effective is the CLTS process in ensuring equitable access to sanitation and hygiene? Is there enough research or evidence available on this topic, or does further research on CLTS and equity need to be conducted?
- CLTS in extra-household settings was not presented during the session on this topic. Is this simply because no one volunteered to present or does more work need to be done to have CLTS reach schools, market centres, health centres, and other institutions? What modifications need to be made to the process (if any) when applying CLTS to extra household settings?
- For those countries which do not include hand washing in their ODF criteria, how is hand washing behaviour change measured? How much of a focus is hand washing in the CLTS processes of various countries?

Overall Impressions

The symposium was a good networking and learning experience, covering many topics related to sustainable WASH service delivery at a very high, international level. There were some good keynote presentations on post-2015 JMP indicators, human rights and WASH, and PhD research conducted on M&E on biases which influence monitoring and whether the data we gather is used (the preliminary findings state that they are not used). The sessions were great for taking in information from the presenters, but space and time for discussions and hearing from non-presenters were quite limited. It was also difficult to gather very tangible ideas for practitioners to take forward, likely due to lack of time for each session. However, there were multiple side conversations which were useful and follow-ups can be made to contacts to get additional details on what was learnt.

Useful Links:

- IRC WASH M&E Symposium: <http://www.irc.nl/page/77979>
- Slides from presentations can be found on SlideShare (search for the title of the presentation, which can be viewed on the symposium programme)